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ABSTRACT

This book presents policy recommendations for ensuring the success of American citizens in the areas of welfare prevention, school dropouts, teenage pregnancy, adult literacy, and alcohol and drug abuse. Welfare prevention strategies involve reduction of welfare dependency and targeting of resources and programs that reduce the need for families to resort to the welfare system. Dropout prevention strategies encompass individual consideration of students' cultural, language, and family backgrounds in instructional development, development of early-warning mechanisms, and school staff trained to work with at-risk students. Key recommendations regarding teen pregnancy encompass dealing with other problems that sometimes lead to early sexual activity and unawareness and unaccountability among young teenagers. Adult literacy recommendations consider the need for program productivity and accountability, improvement of workplace literacy, and parent and child literacy programs. Recommendations aimed at decreasing alcohol and drug abuse include comprehensive programs for all age groups, training of teachers and social workers to spot problems at an early stage, and increasing coverage for treatment. The role of the federal government as a partner with states to develop strategies promoting self-sufficiency are discussed. (CB)

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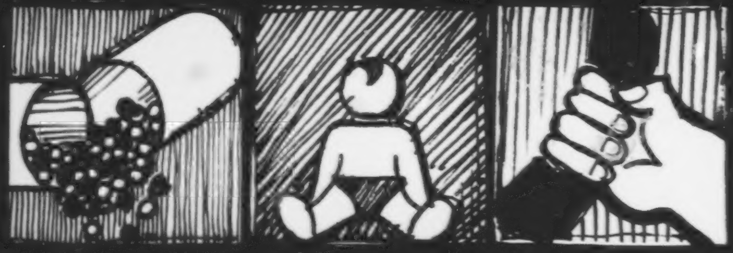

# MAKING AMERICA WORK

PRODUCTIVE
PEOPLE
PRODUCTIVE
POLICIES

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## BRINGING DOWN THE BARRIERS

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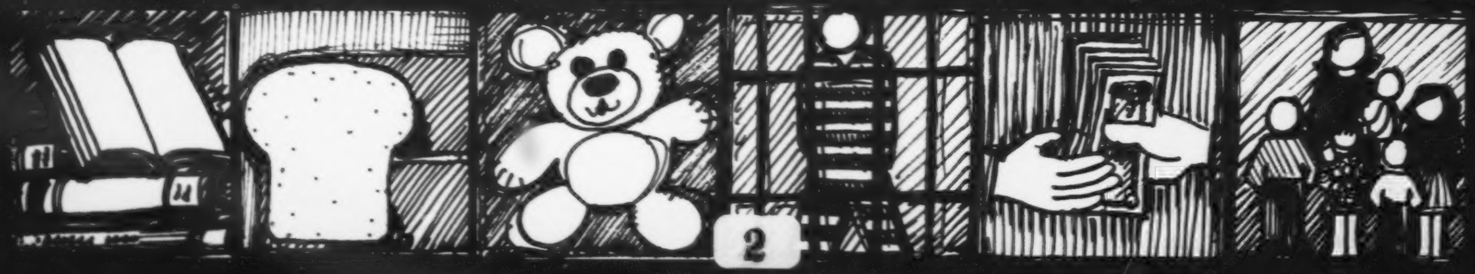

# MAKING AMERICA WORK

## Productive People, Productive Policies

*Chairman*
**Governor Bill Clinton**

**NATIONAL GOVERNORS' ASSOCIATION**

**CENTER FOR POLICY RESEARCH**

## *National Governors' Association*

The National Governors' Association, founded in 1908, represents the Governors of the fifty states, the Commonwealths of Puerto Rico and the Northern Mariana Islands, and the territories of the Virgin Islands, Guam, and American Samoa. Its mission is to influence the development and implementation of national policy and to apply creative leadership to state problems.

NGA membership is organized into seven standing committees in major substantive areas: Agriculture, Criminal Justice and Public Protection, Economic Development and Technological Innovation, Energy and Environment, Human Resources, International Trade and Foreign Relations, and Transportation, Commerce, and Communications. Special committees and task forces are formed in response to principal concerns of the Governors.

The Center for Policy Research serves as a vehicle for sharing knowledge of innovative programs among the states and provides technical assistance to Governors. The center manages a variety of federal grants and foundation-funded activities and state demonstration programs in areas that include education, economic development, labor market and occupational analysis, socioeconomic forecasting, health care financing alternatives, job training, and state human resources management systems.

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# CHAIRMEN'S SUMMARIES

## MAKING AMERICA WORK

When I became chairman of the National Governors' Association in the summer of 1986, the Governors had been working hard for four years on education reform—one of the most fundamental issues of our time. Our association had just issued a report on what the Governors should be doing for the next five years to keep the reform bandwagon rolling and our schools improving. Yet I assumed the chairmanship with the haunting sense that, as critical as these efforts were, we could and should do more.

As important as our educational reforms are, they will not reach millions of Americans who face barriers that prevent them from taking full advantage of better schools or even from becoming productive citizens.

As important as it is to prepare our people to succeed in a highly competitive world, education alone will not guarantee them opportunities. They also need sound economic policies to provide good jobs.

Because we plainly have both people problems and economic policy problems that must be addressed before our efforts in education can bear full fruit, I asked the Governors to face our responsibilities in these areas. Not with more studies, but with action plans and programs.

I asked the chairmen of the committees on Economic Development, Trade, and Agriculture to co-chair an effort to develop solid strategies for state and regional economic development activities, to highlight successful programs, and to explore the extent to which programs in place in prosperous areas would or would not be likely to help more depressed regions. The report of the Task Force on Jobs, Growth, and Competitiveness is the result of the work that Iowa Governor Terry Branstad, Massachusetts Governor Michael S. Dukakis, and Virginia Governor Gerald Baliles directed.

I also established a welfare prevention project, composed of five task forces dealing with the most widespread and crippling barriers to productive lives in America today: welfare dependency, school dropouts, teen pregnancy, adult illiteracy, and alcohol and drug abuse. The plans developed by these task forces emphasize prevention and are designed to enhance the ability of our people to live up to their God-given capacities and in so doing to provide the critical contributions we need from them. I am grateful to Delaware Governor Michael N. Castle, Minnesota Governor Rudy Perpich, Illinois Governor James R. Thompson, Missouri Governor John Ashcroft, and Kentucky Governor Martha Layne Collins for their work in chairing these task forces. Their work is found in the "Bringing Down the Barriers" Report.

Together these two reports comprise the project "Making America Work: Productive People, Productive Policies."

### MAKING THE CONNECTION

The job of governing any state in 1987 is defined in large measure by the economic realities of our time. Some states and regions are doing well; some are not. Within each state, some people are doing well; some are not.

Clearly many of our present problems grow out of the painful truth that we were largely unprepared for the onslaught of global economic competition over the last decade and a half. Too many of us for too long took it for granted that America's position as the world's dominant economic power was permanent. Now we know better. Since 1973, median income has declined 17 percent. Forces of international competition have disrupted the equilibrium of our society and called into question President Kennedy's adage that "a rising tide lifts all boats." Between 1981 and 1986, while several million jobs were added to the economy, 40 percent of Americans suffered a decline in real income, 20 percent held steady, and 40 percent enjoyed an increase.

America has split in other ways as well. Prosperity has a distinctive geographic feature. It can be found largely in the states along the Atlantic and Pacific coasts and in certain urban areas in the heartland. Most of America's continuing economic distress is found in our deflation belt, in the states from Canada to the Gulf of Mexico with economies based on agriculture, energy, mining, timber, and import-vulnerable manufacturing.

There have been deep and troubling ruptures in the fabric of American society. In 1985, for the first time, the percentage of our elderly citizens living below the poverty line was smaller than the percentage of the non-elderly in poverty, a remarkable achievement for which our country can be proud. Unfortunately, this development was paralleled by a dramatic rise in the number of single-parent households, often headed by divorced women whose incomes dropped markedly after divorce; huge numbers of young women and children in poverty; millions of adults so illiterate and unskilled they are unemployable in today's economy; high rates of welfare dependency, teen pregnancy, school dropouts, and drug and alcohol abuse. The consequences of these developments can be seen most vividly in the swelling number of the homeless throughout America.

The news is, of course, not all bad. In the last six years our country has gained about 10 million new jobs, far more than our competition in Europe. There is evidence in virtually every state that more and more manufacturers have been willing to make the hard decisions necessary to increase productivity to internationally competitive levels. The results of the last few years of effort in education are paying off. Our schools are getting better. Our children are learning more.

Moreover, it is important for Governors to note too that many of our problems and some of our sectional prosperity are rooted in international economics and national politics and, therefore, are beyond the direct reach if not the influence of Governors. For example, much of our current trade deficit is a function of the depression in Latin American economies. If the growth rates of the 1970s had prevailed there last year, our trade imbalance would have been 19 percent less. The high dollar that prevailed

> ***"America won't work if Americans can't work, or learn, or believe in the promise of tomorrow."***
>
> Bill Clinton
> *Governor of Arkansas*

until late 1985 plainly worked to subsidize imports and tax our own exports. The dramatic increases in defense spending over the last several years have helped some state economies much more than others.

Still it is plain that Governors can and must do more to make America work by creating more opportunities from the ground up and by reversing the tide of lost human potential that prevents so many of our people from seizing opportunities when they arise.

## MAKING A DIFFERENCE

The policy recommendations in these reports include many actions already successfully taken in some states. Not all of them will be appropriate or even possible for other states. But every state will find something of value in the reports, areas in which more can be done to speed the processes of economic transformation and human development which are critical to our future.

There is no one solution to all the issues dealt with in *Making America Work*, but there are some clear conclusions that any Governor, or any American, regardless of political party, will reach from reading it.

**1**

No matter what burdens or benefits the international economy or national policies may bring to states, practical problem solvers can do things to *reduce* the human loss from welfare dependency and other barriers to full development and to *accelerate* local economic growth.

**2**

It is, therefore, *unacceptable* in 1987 for any Governor to sit on the sidelines and avoid tackling these issues head on.

**3**

We do need some help from Washington, most immediately a good welfare reform bill and a sustained commitment to reduce the deficit.

**4**

While we learned the hard way that we in government cannot solve these problems alone, we have also learned we can't leave them alone. Partnerships with the private sector have enabled states to make progress in other areas. They are essential here, but Governors must take the initiative.

### 5

While citizens have a *right* to insist that the states move aggressively in these areas, they also have *responsibilities* to help the efforts succeed. The heart of our welfare reform proposal is the contract that conditions the right to benefits on the assumption of personal responsibility to pursue a path to independence, through education, training, and work. Similarly, local leaders have a right to expect the state to offer every available and affordable economic development initiative, but unless they assume responsibility for making something happen in their hometowns, the state's efforts will be to no avail.

I believe this model could be used to address other national problems. For example, we might increase rather than decrease student loans to college students, but require the students in return for the *right* to the loans, to assume the *responsibility* of spending a few hours each month teaching illiterate adults to read or doing other public service.

### 6

Welfare prevention and competitiveness, like education reform, are issues of *common interest* to all Americans because we cannot maintain our standard of living or perhaps even our security if we have more incapacitated or underutilized people than our competitors have. That's why investment bankers and defense contractors should care about distressed farmers and at-risk children. We're all in this together.

## MAKING A COMMITMENT

I believe Americans are coming together on these issues because we want to preserve the American dream. And we know it cannot be done if we continue to behave as a swarm of isolated individuals oblivious to the pain and untapped potential of our fellow citizens.

When I was a small boy I was taught, like so many of my generation, that I had to get a good education and work hard so that I could do better than my parents and grandparents had done. Citizens of that time took the overall economic health and strength of America for granted and worked to make sure their children could benefit from it more than they had.

Today I want my daughter to get a good education not only for her own benefit, but for me and my generation as well. And I know we need her classmates, some of whom are from poor families, to do well too because the future of our great American experiment depends on it.

That is perhaps the fundamental lesson of our time: America won't work if Americans can't work, or learn, or believe in the promise of tomorrow.

In this 200th year of our Constitution, the Governors have a special responsibility to make America work. This report is designed to help them fulfill it.

Bill Clinton

Bill Clinton
*Governor of Arkansas*
*Chairman*
*National Governors' Association*

# TASK FORCE ON WELFARE PREVENTION

In March 1986, Tennessee Governor Lamar Alexander, then chairman of the National Governors' Association, asked eight Governors to develop a comprehensive welfare reform policy for the association. The Welfare Reform Task Force, which I co-chaired with Arkansas Governor Bill Clinton, made two early, critical decisions. The first was that "welfare" policy both at the state and federal level needed to be redirected, from a system designed originally to provide maintenance payments to women and their minor children to a new system designed to help clients move to self-sufficiency and independence. The second critical decision was that states could do much to facilitate the planning and allocation of resources to attack some of the root causes of welfare dependency.

We renamed ourselves the Task Force on Welfare Prevention and began to outline a strategic plan for welfare prevention built around five key planning assumptions:

- Strategies will be designed to reduce welfare dependency and thereby reduce the incidence of poverty and its debilitating effects on children and their families.
- The state and federal governments can, over time, reduce public expenditures for welfare by targeting resources to programs that reduce the need of children and their families to resort to the welfare system.
- Investment in human potential and spirit is the most critical piece of a good economic development strategy.
- Public welfare policy should advance the basic societal value that able-bodied individuals should support themselves and their children through their own efforts.
- Goals and objectives must embrace the notion of a social contract based on the principle that responsibility for reducing dependency flows in two directions: the individual to strive for self-sufficiency and society to remove the barriers to self-sufficiency.

The question always before us was what series of strategic interventions can be made, and at what points in a person's lifetime should they be made, to maximize every individual's chance to be healthy, productive, and independent?

Because our original charge was a welfare reform policy, we applied the question first to current adult welfare recipients. We looked at the historical mission and structure of the Aid to Families with Dependent Children program. We talked to clients. We read the available research on both the characteristics of AFDC clients and the impact of AFDC on their lives. We concluded that the current welfare system requires people to choose between security without pride or pride without security. We knew there was a better way!

In February 1987, the Governors adopted a new welfare reform policy. It contains the key elements that we believe will turn our welfare system into a meaningful pathway to self-sufficiency and independence. We support a strong child support system that enforces the belief that each parent has a responsibility to support the children he or she brought into the world. We support a flexible employment program with a rich mix of services ranging from remedial education and training to child care, with a case management component to ensure that services are individualized to recognize the client's needs, resources, and family circumstances. We support a contract between client and agency that clarifies the responsibilities of each. We believe that government can help remove disincentives to work and smooth the transition to self-sufficiency by providing key support services, such as child care and health care coverage. Finally, we support a revised income assistance program, a family living standard based on state-specific costs of living, to provide fair and adequate support to families as they move toward independence, to help families who might never become totally free of their need for our help, and to nourish and sustain children regardless of where they live.

With our welfare reform policy adopted and moving toward congressional action, we turned again to the question of strategic points of intervention in a person's life that would reduce the risk of eventual dependency. We asked ourselves what we could do for the 7 million children who live on AFDC and the 5 million children not served by the welfare system who live in poverty in our country. The information emerging from the Barriers task forces about the interrelated nature of the problems of teen pregnancy, substance abuse, school dropouts, and adult illiteracy, and their common bases in low academic achievement, low self-esteem, and restricted life options, haunted us as we searched for the key elements of a strategy for children.

A simple yet profound truth emerged. Through investment in some very basic protections for our children, we can reduce their risk of dependency, their risk of failing in school, their risk of unhealthy lives, their risk of feeling that life has little to offer them. Comprehensive prenatal care, preventive health care, a healthy diet, child care that enhances children's educational and social development, family resource centers to nurture and support the efforts of parents to raise healthy children, and recreation opportunities that positively engage children's energy—these are the things in which we must invest.

We believe that our best contribution to the welfare debate has been to reshape the way we see the problem. We can all look at the streams of discouraging statistics and see a large and hopeless mess. Or we can look at the statistics and see opportunity—opportunity to change the way we do business, to invest wisely, systematically, and substantially in prevention.

The question before us is how to bring down the barriers to productive lives, invest in our human capital, and put America in position to participate competitively in a global economy. We must act in concert—Governors, Congress, county commissioners, mayors, state legislators, citizen advocates, communities, and churches. We must act deliberately and thoughtfully, incrementally implementing investment strategies based on tested ideas.

The recommendations developed by the Task Force on Welfare Prevention represent an important first step toward conscious, thoughtful investment in our children and in our adult welfare recipients. We believe that the "welfare" problem will be solved only when we have multiple intervention points that can ensure that we do not mortgage our future by failing to invest in the present.

Our problems are complex but they can be solved. We cannot afford not to solve them. Our very survival as a nation of compassion, creativity, and strength depend on it.

Michael N. Castle

MICHAEL N. CASTLE
*Governor of Delaware*
*Chairman*
*Task Force on Welfare Prevention*

# TASK FORCE ON SCHOOL DROPOUTS

A nation's brainpower is the wellspring of economic growth. A recent study by the U.S. Department of Education links Japan's economic success to the rigors and efficiency of its schools. Among the critical differences between schools in Japan and in the United States is that the Japanese generally seem to expect a higher level of performance from their children. The Japanese expect that all their children will do well, and that expectation pays off. We must rekindle in the United States the expectation that our children . . . all of our children . . . will do well.

What can we as Governors do to bring about increased school achievement and completion among our nation's youth? First, we can help shape public opinion. We can convey the importance of keeping our young people in school, and the certainty that we can accomplish it. Second, we can move forward with the restructuring of our schools which is necessary to facilitate effective teaching and learning. And finally, we can make a strong and highly visible commitment to education through our budget priorities.

Directing resources toward education is a wise investment because it continues to be the main path to opportunity, economic self-sufficiency, and productive citizenship. Every state dollar invested in educating potential dropouts returns an estimated $9. We will pay a high price in the future for failing to invest in our youth today. We will pay that price not only in disappointment, but also in hard dollars.

What is the alternative to completing high school? For some, it means a life of crime. Research has shown that most people in our correctional institutions have a history of school failure. The cost of this failure is high, both for the individual and for society. In Minnesota, it costs $23,400 to incarcerate one adult male for one year. For less than that amount we could support an individual through a year of study at Harvard University.

For others, dropping out means a life of poverty in dead-end jobs or on welfare. Dropouts are at greater risk of involvement with drugs, and teenage pregnancy is often associated with dropping out of school. Young parents whose skills are not adequate to support a family often face a choice of two existences: living the difficult life of the working poor or living with the stigma of welfare dependency.

It is clear that the task of increasing the rate of retention to high school graduation cannot be separated from the larger ongoing concern with school reform. We must ensure that the high school diploma reflects the acquisition of skills that for some are immediately transferable to a range of job situations and for others to the demands of postsecondary education.

Our recommendations for dropout prevention and intervention strategies are based on these conclusions:

- A deficiency in basic educational skills is the one characteristic that most at-risk youth have in common.

- Solutions to the school dropout problem are complex and require cooperation among schools, parents, the business sector, and a network of public and private agencies.

Evidence considered by the task force suggests that there is no single isolated prevention or intervention effort that works. A range of services, beginning with adequate prenatal care for mothers and early childhood development services and extending to programs that give dropouts a second chance, must be provided. State prevention and recovery strategies must take into account the following factors that researchers and practitioners in the fields of education, business, and social services agree are vital:

- Consideration of a student's culture, language, and family circumstances in determining the appropriate curriculum and instructional techniques.

- Involvement of a student's parents or guardians.

- Student and parental choice among appropriate educational settings.

- A professional school staff trained to work with at-risk learners and committed to their success.

- Early warning mechanisms to identify at-risk learners and develop effective responses to meet their needs.

- Cooperation among public agencies, business, and other community organizations in seeking solutions.

- Adequate resources to support dropout prevention initiatives.

- Enhancement of the students' appreciation of the value of education.

The two most encouraging findings to emerge from the work of the Task Force on School Dropouts are that many states are already addressing the dropout problem with creative prevention and intervention strategies, and that private industry is concerned and is committed to help provide effective solutions.

Our task as Governors is to build upon the current initiatives and commitments, using the policy and program elements identified herein to map out a strategy to remove the barriers to social participation and self-sufficiency that so many of our young people confront when they drop out of school.

Rudy Perpich

RUDY PERPICH
*Governor of Minnesota*
*Chairman*
*Task Force on School Dropouts*

# TASK FORCE ON TEENAGE PREGNANCY

American society is built on a longstanding, strong set of values. Those values are not given to us but are renewed in each generation by family, community, education, and government. The building must be strong and purposeful. It is constantly tested by the independence of mind and body each generation possesses. Where we fail to address fundamental community values in public policy, we fail at a cost to all of us. This failure shows up in a dependent population that cannot think and act on its own or that cannot survive without government assistance. It also shows up in that portion of any generation that wastes its potential.

No potentially greater waste exists than in 400,000 children a year who become parents. They risk their children's futures, their own futures, and—when they become dependent on the community and government for survival—our future as a strong society. Yet they represent only a part of the problem. The dimension of the problem is more accurately shown by the 1 million children a year who become pregnant.

The Task Force on Teenage Pregnancy believes that state government—-and particularly Governors—are in the pivotal position to develop policy on this vital issue. They can help to strengthen the role of the family in bringing up young people, to help create community-based programs that will prevent teenage pregnancy, to prepare teenage parents for an independent life, and to show the leadership necessary to marshal private, state, and federal resources to make certain that a coordinated, strong statewide program is available.

State efforts can bring positive changes. The task force found in its deliberations that where communities and states had developed bold, positive programs, the reduction of teenage pregnancies and teenage births had been significant.

Key recommendations of our task force include:

- The Governor's role is to provide the leadership to assure that the resources of family, community, and government are melded together in a coordinated approach to adolescent pregnancy prevention. Each state and each community should be encouraged to develop its own specific program. The report suggests an eight-step approach to ensure that tailored programs will appropriately address the complexity of the problem in different states.

- More and more evidence is available that links the problems associated with early sexual activity, early pregnancy, and early parenting to other problems that may have serious negative effects. Coordinating programs that help school underachievers; prevent students from dropping out of school; reduce alcohol and drug abuse, smoking, and delinquency; and prevent teenage pregnancy are difficult but essential steps for states to take.

- States must develop initiatives to increase the awareness and accountability of young males. From the prevention of early sexual activity to the responsibility of parenting a child, the male should have equal responsibility. The task force believes that we have a better chance of addressing the total problem if there is an increased emphasis on male responsibility.

The issues surrounding teen pregnancy are complex and controversial. Each community must decide how it will grapple with such areas as expanding services that will prevent early sexual activity and balancing them with programs that make contraceptive methods available and accessible to adolescents who are sexually active. Facing teenage pregnancy now and facing it squarely with programs that ensure the parents finish school and are trained for employment, and have access to health care and child care, will in the long run prevent lost generations and reduce public costs. Preventing teen pregnancies will save future generations.

JAMES R. THOMPSON
*Governor of Illinois*
*Chairman*
*Task Force on Teenage Pregnancy*

# TASK FORCE ON ADULT LITERACY

Too often we think of "the employment problem" only in a broad sense—a given percentage of the workforce that is unemployed. But another way to look at the problem is in personal terms—the inability of individual workers to find and keep good jobs. Looking at the problem in such human terms permits us to focus on the specific skills and abilities that make individual workers employable and productive.

Helping people get the skills necessary to find jobs is one of any Governor's most important areas of action. But significant numbers of our people are not able to "get in the game." At a time when the demographics of our nation's work force are changing—our declining birth rate is expected to lead to a serious shortage of qualified workers by the year 2000—it is vital that all of our potential workers have the tools they need to find jobs.

Governors must work to see that all their people have the skills necessary to get off the bench and onto the playing field—if our nation is to have a shot at prevailing in the competitive game in which it finds itself.

Low levels of literacy may be the greatest barriers keeping people out of productive employment. The Task Force on Adult Literacy recognizes states' crucial role in fostering increasing opportunities for our citizens to acquire the skills and abilities that are vital to a literate society.

Our task force's work came at an opportune time, for national interest in issues related to literacy is high. My colleagues on the task force and I believe that Governors and other state policy makers are in a crucial position to advance the discussion of literacy in this country. In fact, they may be the most important agents who can broaden and strengthen the delivery systems serving those who want to enhance their literacy skills.

The work we have done over this past year has been achieved with the help of many people, businesses, and groups that are deeply involved in efforts to enhance our citizens' literacy skills. Specifically, our task force worked with the Business Council for Effective Literacy, the National Alliance of Business, the American Broadcasting Company, the Public Broadcasting Service, the National Assessment of Educational Progress, the Adult Literacy Initiative of the U.S. Department of Education, the Education Commission of the States, the Council of State Policy and Planning Agencies, and many other key national actors in literacy promotion.

These groups and others were represented at two forums our task force sponsored on literacy—one in Kansas City and another in St. Louis. Members of the task force were interested in discussing the most recent information on the nature of illiteracy in the United states, innovative strategies for dealing with the problem, and how state government can work more closely with business to deal with the challenge of workplace literacy.

Based on its work, our task force has developed an Agenda for State Action that Governors can use to improve literacy in their states, thereby helping people acquire the tools they need to get off the bench and onto the playing field of productive work. This plan to get our players into the game—our Literacy Lineup—has seven parts.

- First, Governors should focus attention on the needs of adult learners so that those who drop out of school and those who graduate without basic skills can attain the skills necessary to become active participants in the world of work. Adult education also helps to maintain the work force's competitiveness at a time of rapid change in the workplace—it helps our nation sharpen its competitive edge.

- Second, Governors must find ways to improve workplace literacy. Governors can help in this effort by encouraging education and training programs in the workplace. When new technologies are introduced into the workplace, or when an employee is given the opportunity to assume increased job responsibilities, there must be an accompanying change in literacy skills and abilities. To meet the challenges that new technologies present, Governors should work to find new ways to support business and workers in fostering higher workplace literacy skills.

- Third is the need to foster cooperation among state government, the private sector, and volunteer groups in the assault against illiteracy. At the same time, Governors should also see to it that state agencies—such as our departments of education, corrections, social services, labor, job training, and our state library networks—coordinate their programs and services to better meet the needs of citizens who have low levels of literacy.

- Fourth is the need to further program productivity and accountability. Governors can take the lead in helping literacy providers develop and obtain the best materials to help people grow and enhance their literacy skills. In addition, Governors need to take the lead in requiring that literacy programs that receive state dollars demonstrate their effectiveness and efficiency for purposes of public accountability.

- To keep illiteracy from being passed on from one generation to the next, Governors should facilitate means by which parents and children can jointly enhance their literacy skills. Programs such as Kentucky's Parent and Child Education program and Missouri's Parents and Teachers program encourage parents to develop their children's linguistic skills (and other skills) at an early age. At the same time, parents with low literacy skills can also enhance their own skills.

- The next prevention strategy is for Governors to follow through with existing efforts to reform elementary and secondary education. Clearly, if our economy and society demand ever-increasing levels of literacy, our schools must be able to bring young people to those higher levels. This continuing need to foster better and more productive schools—the message of *Time for Results: The Governors' 1991 Report on Education* issued last year—is an important strategy in the fight against adult illiteracy.

- The seventh component of the Literacy Lineup is the need to formalize plans to help welfare recipients receive those basic literacy skills that will enable them to find productive employment. The lack of these skills keeps recipients on the welfare rolls and off the payrolls, and prevents them from contributing to the national economy. Through education programs targeted at welfare recipients, states can help these players obtain the skills they need to get into the game and play to their fullest potential.

Woven into these recommendations is the recognition that current definitions of literacy will change over time as the demands of the economy, the workplace, and society change. In a sense, literacy is a moving target. If we try to attack the problem with yesterday's solutions, we won't be able to solve it. As our understanding of what it means to be literate in an information and service society increases, we must also propose strategies that are compatible with this new understanding.

We all want our states and our citizens to be productive and competitive, and enhanced literacy skills will serve to eliminate one of the chief barriers to productive work and productive lives. Better literacy skills will help us get all of our players off the bench and onto the playing field of international economic competition.

John Ashcroft

JOHN ASHCROFT
*Governor of Missouri*
*Chairman*
*Task Force on Adult Literacy*

# TASK FORCE ON ALCOHOL AND DRUG ABUSE

In the poignant words of a nervous teenager, America's Governors learned anew why an agenda for action against drug abuse is imperative for every state. The teenager was Amy Freeman, a seventeen-year-old from northern Kentucky who had waged a sixteen-month struggle against drugs. Amy's story was frightening in its details, compelling in its drama, hopeful in its message. It was a story of an adolescent in turmoil that seemed all the more puzzling because it occurred in the midst of affluence. It was a story of a family nearly destroyed, of life nearly lost. Yet, in the end, it was a story of personal triumph that gives all of us reason to be optimistic about what we can accomplish.

As Amy talked at the February 1987 meeting of the Governors, I occasionally glanced at faces around the table and around the room. People listened raptly. Some, trying to be inconspicuous, wiped hastily at their eyes. I could tell that the story of this young woman's plunge into drugs and her resulting struggle to regain control of her life, gave the problem of drug abuse among millions of the nation's youngsters a renewed sense of urgency for everyone.

Governors were not listening strictly as Governors anymore. They were listening as every mother and father who has ever feared that a son or daughter might somehow become addicted to drugs. In Amy, they recognized again that the problem can strike anywhere.

Amy's parents sat beside her. Her father, Louis, is president of a successful shoe equipment manufacturing firm. Looking at the three of them you sensed that when their friends learned of Amy's addiction, they wondered how it could happen in such a respected family. There was no broken home, no collapsing marriage, no lack of food or clothes or material comforts.

Amy herself said: "I had every opportunity that I could have needed or wanted." That is, she observed, she had everything she could want "on the outside." But she felt she had nothing on the inside. She was lonely; she felt despair. In her personal turmoil—not unlike that of many other adolescents—Amy turned to drugs when she was eleven or twelve.

First, she said, it was alcohol. This was convenient. She could sneak around the house and find something to drink. She liked the feeling, the thrill, it gave her. In alcohol she found new confidence, and it seemed easier to make friends. Eventually, she moved on to marijuana, pills, and inhalants. It made life seem better; people seemed to accept her more readily.

But Amy started to realize that when she wasn't on something life was forty times worse than it "was when I was younger . . . I hated myself." Her grades were shot. School became "a joke." Drugs and friends were the only reasons she went. But the drugs could no longer fill the emptiness she felt inside. She and her parents battled. Eventually, she attempted suicide.

During this time, Amy's father said friction grew between him and his wife. They ignored their other three children as they tried to deal with Amy's problems. "Basically, Amy ran our family when she was addicted to drugs," he said. Finally, they sent her to boarding school, hoping the change and stricter discipline would bring her back into line. Amy told us, though, that the parents of every other student there must have had the same idea. At school she met young people who had moved on to heroin and LSD. Amy was "chicken" to try those. "I wanted to, but I was afraid."

By the time she finished her first year at the school, her parents recognized that they had to do something more fundamental than changing schools. The something they discovered was a program called "Kids Helping Kids," in which youngsters who have won their own struggles against drugs help those like Amy.

And "Kids Helping Kids" is why Amy's story is, ultimately, one of hope. The program clearly works. Amy is proof. When she told us that in a few weeks she would celebrate eighteen months of being drug free, the audience applauded her personal triumph.

Our challenge is to replicate Amy's triumph over and over again—in cities, in rural areas, in wealthy subdivisions, in ghettos. Beyond that, of course, our challenge is to persuade youngsters to choose not to indulge in drugs in the first place.

And we know the problem is not just our young people. Alcohol is clearly the most abused drug, and nearly 10 million men and women in America have become problem drinkers. It is a problem in the workplace, in the home, in our schools. Beyond the human suffering, the cost of alcohol and other drug abuse is staggering—an estimated $205 billion annually.

It was for these reasons and because of young people like Amy and others whose lives are being shattered that I eagerly agreed to chair this task force.

Our recommendations are far reaching. They are comprehensive; we believe that any effective approach must include programs for prevention and education, training and professional development, intervention and treatment, and interdiction and law enforcement. Our recommendations are practical. They can be adapted to the particular needs of individual states. They include:

### Prevention and Education

- Comprehensive programs must be developed for all age groups. A program that works with young people will often prove ineffective for adults.

- All key groups should be involved: students, teachers, parents, business leaders, clergy, and enforcement.

- Programs must begin early and last through a lifetime.

### Training and Professional Development

- Training must sharpen the ability of teachers, judges, social workers, and others to spot problems early; explore the various causes of abuse; increase understanding of appropriate treatment programs for different age groups and varying causes of the problem; and provide guidelines for enlisting the media to assist in education and prevention programs.

### Intervention and Treatment

- States should explore the possibility of increasing coverage for treatment under government programs as well as private ones.

- Social service agencies must be more aggressive in identifying problems.

- Criminal justice systems must seek to identify individuals who require treatment for drug or alcohol abuse.

### Law Enforcement

- Current laws relating to drunk driving, the sale of alcohol to minors, and illegal drug sales must be more strictly enforced.

- The federal government should be encouraged to continue cracking down on illegal drug sales and drug smuggling.

- More resources should be dedicated to enforcement.

Our report, of course, presents detailed recommendations in each of these areas.

The task force believes that Governors can play a key role in ensuring more successful programs. Governors can gather the information necessary to gauge the scope of the problem; encourage agencies to work together; lead the effort to make communities more aware of the problem and to involve key groups in the program; and set the long-range goals for developing effective programs.

Our recommendations form a framework for action that can enable individuals and families to enjoy a future free of the blight of drug addiction and alcoholism. And we challenge Governors and appropriate officials in every state to examine these recommendations and to adapt them to their own needs.

Martha Layne Collins

MARTHA LAYNE COLLINS
*Governor of Kentucky*
*Chair*
*Task Force on Alcohol and Drug Abuse*

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# SETTING THE STAGE

> *"A child is a person who is going to carry on what you have started. He is going to sit where you are sitting, and when you are gone, attend to those things which you think are important. You may adopt all the policies you please, but how they are carried out depends on him. He will assume control of your cities, states, and nations. He is going to move in and take over your churches, schools, universities and corporations. All your books are going to be judged, praised or condemned by him. The fate of humanity is in his hands."*
>
> ABRAHAM LINCOLN

From its earliest days, the United States has been a land of hope for the poor, the persecuted, the adventurous, those who seek freedom and opportunity. It is a land founded in the belief that through education and hard work people can experience peace and prosperity.

For most, this is the land of the fortunate. Most children are born healthy, graduate from high school, are free from the ill-effects of substance abuse, and are active, productive members of society.

But for some, it is a different land. These people suffer from poor health, have not achieved in school, lack adequate job skills, and do not have the basic tools they need to lead self-sufficient and productive lives. The plight of America's most vulnerable is both a personal and a national tragedy. Today, the United States faces a competitive challenge that will require more and more people to be productive participants in society.

In the words of Gordon Berlin of the Ford Foundation and Andrew Sum of Northeastern University, "The place we are accorded in the world, the success of American business, the future of our children, the mores of our society, and the very character of our everyday standard of living hang in the balance" (Berlin and Sum 1987, 55).

What causes these problems? Often they transcend race, socioeconomic status, or other traditional groupings. Frequently, cause and effect cannot be easily differentiated because the problems are both interdependent and interrelated. For instance, research has shown that a parent's educational level has an important effect on his or her child's educational achievement (Jungeblut and Kirsch 1986, 48–50). In turn, weak basic educational achievement is a predominant characteristic of teens who become pregnant (Sum and Taggart 1987). Teenage parents are less likely to finish high school than are other teens (Hofferth and Moore 1978).

Research indicates that earnings are primarily linked to education, and the earnings gap between high school dropouts and graduates is dramatic (Berlin and Sum 1987). It is not surprising that nearly half of the families who live in poverty are headed by female dropouts (Earle and Roach 1987, 1).

## Who Faces These Barriers?

Pregnant teens, school dropouts, adults with literacy deficiencies, poor women who head households, individuals who are dependent on drugs or alcohol—these people face barriers daily. Their life situations are both barriers and effects of barriers placed in the way of self-sufficiency and productivity. Often the cycle continues between generations, and many experience more than one of these barriers.

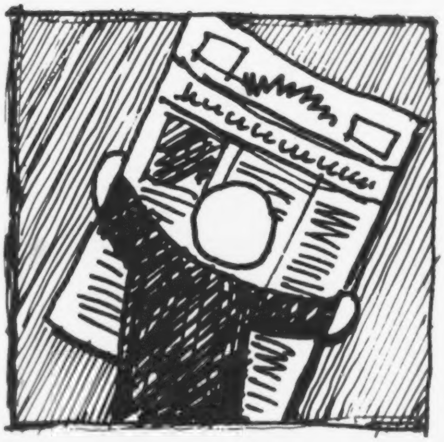
The statistics about America's children are particularly tragic. For every hundred children born today, thirteen will be born to teenage mothers; fifteen will be born to households where no parent is employed; fifteen will be born into households where the working parent earns a below-poverty wage; and twenty-five will depend on welfare for at least a portion of their childhood (Children's Defense Fund 1987, xii).

The impact of these barriers is measured in the loss of human potential, in the cost of governmental services, in the loss of productivity, and in increased costs to the private sector.

The cost in human potential is obvious:

- More than 1 million teenagers become pregnant each year and 470,000 give birth (Hayes 1987).

- Babies born to teenage mothers are more likely to have low birthweights than the general population (9.5 births per 1,000 versus 6.8 per 1,000) (CDF 1987).



- Low birthweight babies are twenty times more likely to die in their first year of life than those of normal birthweight, and they have a significantly greater risk of developing permanently handicapping conditions such as retardation, cerebral palsy, and autism (CDF 1987).

- More than one in seven youths fail to graduate from high school, and these dropouts are two-and-one-half times more likely to be unemployed than high school graduates (CDF 1987).

- One in ten adults in the workforce suffer from serious alcohol or drug abuse problems that can threaten their health, their jobs, and the safety and stability of their families (NASADAD 1984).

> *"We have to do more to make our people productive. You can have the best school system in the country, and if you recognize that 75 percent of the people who will be in the work force in the year 2000 are already there and, therefore, won't be touched by our educational reforms directly and that 25 percent of the kids in school now will drop out, it is obvious that we have to do more than simply improve our educational institutions."*
>
> BILL CLINTON
> Governor of Arkansas

The costs to government and the private sector also are staggering:

- Federal and state governments spend almost $41 billion annually for Aid to Families with Dependent Children, general assistance, Medicaid, state health programs, and food stamps to support poor families (U.S. Congress 1987). About $18 billion was spent in fiscal 1986 under some of these programs to support the families of women who first became mothers as teenagers (Center for Population Options 1987).

- The lifetime cost of a single alcohol or drug abuser currently is estimated at $85,000 in lost productivity and direct economic burdens on society. The estimated annual cost to society of alcohol and drug problems other than tobacco is approximately $205 billion (Office for Substance Abuse Prevention 1987).

- The lifetime tax revenue forgone as a result of the lower earnings of young people who dropped out of high school in 1981 alone is estimated at $68 billion (Catterall and Stern 1986).

- Neonatal care to save low birthweight babies costs approximately $1,200 per day (CDF 1987, xxi), and the lifetime cost of a newborn who suffers fetal alcohol syndrome from its mother's drinking is estimated at $596,000 (OSAP 1987).

It is obvious that the barriers to individual and collective achievement and productivity exact a tremendous toll on people and on society—one that the United States can ill afford. Action must be taken now to bring down the barriers to human potential. The task, while difficult, is not too large and the effort is well worth the investment. The problems can be solved and America can be made to work for all her people.

## The Benefits of Prevention

Traditional responses have focused on treating problems after they become acute, rather than preventing problems before they occur. There is clear evidence, however, that there are human and economic benefits to a strategy that invests in people to prevent later problems.

For example, $600 invested in early, comprehensive prenatal care for pregnant women saves not only babies' lives, but it also saves money by preventing the need for neonatal intensive care. Yet only 76 percent of all mothers and 56 percent of teenage mothers receive early prenatal care. One dollar invested in the Supplemental Food Program for Women, Infants, and Children (WIC) saves $3 in future health costs by aiding healthy births. Yet WIC reaches only 40 percent of those eligible. Immunization prevents serious diseases in children for a fraction of the cost of institutionalizing a child with a serious, preventable handicap. Yet, half of all black preschoolers are not fully immunized. (CDF 1987)

Other research supports the case for an investment strategy. Early childhood development programs have been shown to reduce the need for poor children to be placed in costly special education programs. Evidence suggests that good early childhood programs can improve poor children's achievement in school, decrease school dropout rates, increase rates of postsecondary enrollment and employment at age nineteen, and substantially decrease rates of delinquency and arrest, teenage pregnancy, and dependency on welfare at age nineteen (Schweinhart 1985 and Berrueta-Clement and Schweinhart 1984). Yet one national survey of parents found that only 29 percent of three- and four-year-olds from families with annual incomes under $10,000 were enrolled in nursery school (National Center for Education Statistics 1982).

> *"It was intolerable for this country to live in two societies, one black and one white, and we have tried to address that. Now we have two societies, one literate and one not, and if you are illiterate, it really doesn't matter what your age or sex or religious affiliation is. You cannot be as productive a human being as you would otherwise be."*
>
> WILLIAM BROCK
> U.S. Secretary of Labor

## A New Emphasis

The conclusion is clear. While an effective strategy will have many components, the key must be a new emphasis on prevention. The prevention strategy should begin by focusing gubernatorial leadership on these barriers to self-sufficiency and productivity: welfare dependency, teenage pregnancy, alcohol and drug abuse, school dropouts, and adult illiteracy.

Second, the prevention strategy should recognize that these barriers are interrelated and interdependent. The underlying problems of poverty, low self-esteem, lack of a sense of positive life options, low educational aspirations and attainment, poor nutrition, and little or no preventive and/or primary health care have been consistently identified as factors that contribute to each of these barriers. A prevention strategy should seek ways to intervene in positive ways to improve the lives of people who are at risk.

Finally, the prevention strategy should be guided by some basic principles:

- ■ The nature of the intervention should vary according to the age of the individual for whom the services are intended.
- ■ Multiple points of intervention may be required during a person's lifetime, but prevention must begin early.
- ■ Intervention must recognize the individual's needs, involve the entire family, and maximize client choice.
- ■ State and community mechanisms to support the prevention strategy will vary, will require new ways of working together, and will require resources to be redirected.

# ELEMENTS OF A STRATEGY

What is needed for a healthy, productive life? Certain minimum basic ingredients must be provided if prevention strategies are to succeed. These key elements include good health and nutrition, strong basic educational skills, constructive recreational and service opportunities, and strong parental responsibilities.

***Good Health and Nutrition.*** Good health and a nutritious diet help people perform at maximum capability, and children need these at every stage of development. It must begin with a balanced diet and prenatal care during the mother's pregnancy and continue through life. Preventive and primary health care can detect and treat problems early. Children who receive comprehensive pediatric health care have annual health care costs nearly 10 percent lower than children who do not receive such care (CDF 1987).

***Basic Skills Enhancement.*** Poor educational performance plays a major part in the poor self-esteem that underlies many of the problems that characterize people at risk. Programs need to identify those who are having trouble developing solid basic educational skills and to provide the personal assistance these people need.

> *"One of our concerns as Governors is the whole question of making work worthwhile; for example, if you add the value of AFDC and food stamps and Medicaid . . . and if a person is going to work at minimum wage, where they probably won't have medical insurance, they probably don't see a lot of hope for their future. For that reason, the work becomes a very iffy proposition; to give up the health care in order to work is something they probably don't want to do."*
>
> MICHAEL N. CASTLE
> Governor of Delaware

***Constructive Opportunities.*** Frequently, children and youth do not have positive ways to spend free time, which results in unproductive or detrimental behavior. Expanded recreational and community service opportunities are needed to enhance social, educational, physical, and psychological development.

***Parental Responsibility.*** Parents from all walks of life need to be more involved in their children's lives and need to take greater responsibility for their children. Parents remain the primary source for their children's personal values and sense of self-esteem. Often, parents lack the resources needed to care for their children, or they avoid the financial responsibility for them, or they are excluded from critical decisions that affect their children. Parents should have the opportunities to help themselves to become self-sufficient. For those who are self-sufficient, steps should be taken to see that they care for their children, particularly through improved collection of child support payments. Further, parents must be an integral part of decisions concerning their children.

At the most fundamental level, the success of any prevention strategy hinges on its ability to help individuals gain a sense of their self-worth and to foster hope that the future can offer something positive.

## How to Start

Both the problems and the solutions are complex. No single effort will address all of the barriers. For many individuals, different approaches will be needed at different points in their lives, from a variety of programs and institutions.

A prevention strategy to bring down these barriers to individual self-sufficiency and productivity can be organized around these critical developmental stages:

- Infants under one year.
- The very young, one to five.
- The beginning years, six to ten.
- The middle years, eleven to fourteen.
- Adolescents, fifteen to seventeen.
- Adults, eighteen or more.

Different age groupings could be used. Regardless of the specific age breakdowns, organizing intervention efforts around age groups will help states identify the individuals and institutions that need to be involved, determine duplication or gaps in service, and evaluate programs available to each group. The number of individuals and institutions involved in intervention efforts will increase with the age of the client. However, the family should be the critical point of reference and socialization at all ages. Using these age groupings, some of the key prevention strategies include:

***Infants Under One Year.*** Obviously, the family, and particularly the mother, is the focal point for the unborn child and infant. Pre- and postnatal care that meets the health and nutritional needs of both mothers and children is necessary to ensure healthy babies. Good information about parenting and caring for babies, including nutritional information, is also essential.

***The Very Young (One to Five).*** At this age, the family is still the focal point, but the child's world broadens. During these years, religious, social, day care, and recreation groups help in the young child's socialization process. Early childhood development services are important. Helping parents learn more about their role and about their child's development is an excellent preventive strategy. Other strategies will need to address neglect or abuse and to respond to health, nutrition, safety, and shelter concerns.

***The Beginning Years (Six to Ten).*** The family continues to be a major factor for children during these years, but school plays an increasingly important role. Promoting success in education is crucial for children of these ages. Parents need to be encouraged to participate in the education process. Positive experiences in recreational, social, and religious organizations are enormously helpful. Regular health care can establish good practices for later years and will help ensure that children stay healthy.

***The Middle Years (Eleven to Fourteen).*** This is a period of substantial psychological and physiological development. During this time, a lack of self-esteem often emerges and serious consequences can result. Youth need positive reinforcement from teachers, parents, and other important adults in their lives. Alternative learning environments based on a child's individual circumstances may be needed, particularly for those who might otherwise drop out of school. Agencies that serve youth, including community groups, the courts, and others, need to work with children, parents, and schools in a more coordinated and effective way to make maximum use of resources.

***Adolescents (Fifteen to Seventeen).*** During this period, the influence of peers is strong and behavior often signals independence from parents and reaction to community values. Adolescents try to become independent from their parents and turn to their peer group for support and acceptance. Risky behavior, such as alcohol and drug use or premature sexual activity, may be seen as a way to express growing independence (OSAP 1987). Intervention strategies need to focus heavily on constructive activities both in and out of school. Role models and mentors can be significant, particularly if they help the adolescent develop an awareness of a positive future and reinforce positive self-images.

***Adults (18 or older).*** Some adults need a "second chance," an opportunity to complete their education or to learn the skills needed to remain employable in an ever more complex economy. Others will need job search services or other assistance to complete the transition from school to work, or to find new employment. Still others will need programs to combat alcohol and drug abuse. Those receiving public support need to understand that society expects them to work toward self-sufficiency.

# THE ROLE OF THE GOVERNOR

What role can a Governor play in addressing these problems? The ultimate goal of this initiative is to bring down the barriers to individual success and productivity—and to do so by developing long-term strategies to prevent serious problems such as teenage pregnancy or drug addiction. To do this requires leading people to make fundamental changes in their behavior.

Of course, a Governor cannot and should not be held personally accountable for the individual acts of individual people. The Governor cannot stop a teenage boy from experimenting with drugs or from becoming addicted, or stop a young girl from engaging in premature sexual activity that might lead to pregnancy, or stop a young person who never succeeded in school from actually dropping out and losing any reasonable chance for self-sufficiency.

However, a Governor can alter systems and redirect resources to get at some of the root causes behind the self-destructive actions that lead to dependency. A Governor can bring organizations together to plan and execute services, sometimes creating new working relationships and establishing new administrative arrangements. A Governor can shape public opinion and motivate communities. A Governor can shift incentives to reward successful policies and programs that help individuals overcome the barriers to productive lives. A Governor can create new forms of accountability that measure the success of those services.

Most importantly, a Governor can develop and implement a strategic Blueprint for Prevention that addresses the interrelated barriers faced by people at risk. In doing so, the Governor can function in a variety of roles: chief architect; chief communicator; and chief executive.

## The Chief Architect

As chief architect, the Governor provides leadership in drafting the Blueprint for Prevention. The Blueprint will define the lines of the state's comprehensive prevention strategy. The Governor should:

***Know the Outlines of the Terrain.*** Good design requires good information. The first step is to determine who is affected by the barriers to self-sufficiency and productivity. Fully 25 percent to 33 percent of each state's citizens may be in one of the groups that is at risk. The second step is to develop a broad picture of current state programs, including how much is being spent, for whom, and for what. For example, the Governor might ask how much of the $18 billion spent for costs associated with births by teenage welfare mothers is funded by the state.

Because good, non-duplicative information is not readily available, this exercise will need to start with indicators, that is, information that is available and shows trends in a state. As the Blueprint for Prevention continues to be drafted, more detailed information will emerge.

***Collect Design Information.*** Once the broad parameters of the at-risk population have been defined, more detailed information on resource commitments and program options can be developed.

Cabinet officials should be asked to forecast who will need various forms of governmental assistance in the next five years. For example, how many more correctional facilities will be needed if incarceration rates increase? What are the implications for state welfare costs if teenage births don't decline?

Agencies should be asked to analyze the legislative, regulatory, and guidance mechanisms they direct to determine what, if any, resources are specifically dedicated to the ultimate goal of ensuring self-sufficiency. The analysis should describe how the services are provided and by

> ***"You are not going to have a positive welfare system if you don't make it worthwhile for people. You can have all the good programs you want and have people sign contracts, but ultimately if it is not more beneficial to work than not to work, you are not going to succeed."***
>
> MICHAEL N. CASTLE
> Governor Delaware

whom, and how success is measured, how many individuals are served, and how many are eligible. After such an analysis, the resources can be tallied by age groups, to identify gaps and duplication, as well as statutory, regulatory, or administrative barriers.

This will provide a rough sketch of the landscape that can be used for a variety of purposes. It can be used to create a special analysis section in the state budget that highlights the needs of at-risk populations and focuses attention on the resources to be invested in the Blueprint for Prevention that will bring down the barriers to productive lives. Some states have been successful with creating such things as "children's budgets." A special targeted section of the budget does not negate the need for line agency budgeting—it only complements it.

The sketch can also serve as a working document that can be used by cabinet clusters, interagency task forces, or subcabinet officers to create jointly funded interdepartmental demonstrations and projects that focus on one or more of the barriers, or on a discrete population.

The Governor can use the information to monitor and track success—or the lack of it—in order to refine and retarget resources. The importance of this task should not be overlooked. No business survives for long without information about the success of its products.

This information also can help identify problems within the governmental system. Some ways government does business initially were developed to respond to legitimate concerns on the part of local government, the voluntary sector, professional groups, and special interests, but have since become structural barriers. Some of the structural barriers that may need to be addressed include:

- Federal programs that inappropriately bypass state government and give money directly to local governments.

- Federal and state programs that inappropriately bypass local units of government to give money directly to community groups.

- Programs that are overly targeted or fragmented at all levels of government.

- Program requirements that are inflexible or overly detailed.

- Program designs that do not respond to market changes or that do not adequately respond to consumer concerns.

***Involve Other Groups.*** An effective Blueprint for Prevention cannot be implemented by the state government alone. Determining and targeting state resources charts the beginning steps, but the state's Blueprint for Prevention needs to be integrated into the priorities, structures, and systems of a variety of communities and organizations. The Blueprint for Prevention will need to involve people from the voluntary sector, such as the United Way and local foundations; community-based organizations, including parent-school groups; local elected officials, commissioners, mayors, and school boards; business and labor leaders, associations, and organizations; and religious, social, and recreational organizations.

The voluntary sector provides a significant proportion of the dollars spent on prevention programs. How these dollars are targeted is every bit as important as the way tax dollars are targeted.

Local governments also have important resources and policy responsibilities, and should not be treated simply as administrative agents of state government. If they are to contribute to the overall Blueprint for Prevention, local governments must be involved in meaningful ways, including making decisions about resource allocation; selecting and monitoring service providers; evaluating programs; and improving their own service delivery.

***Create Ownership.*** Involving state and local government, the voluntary sector, the consumers of services, and others in the creation of the Blueprint for Prevention will help develop a consensus, increase ownership, and create a workable design. It will help participants understand the ways in which they relate to each other, and how each contributes to the overall success of the plan.

In addition, establishing clear statewide goals will generate public interest and support for the Blueprint for Prevention. The Governor can challenge communities to help the state take the steps needed to meet the statewide goals. For example, state goals might be patterned after those established by U.S. Health and Human Services Secretary Otis Bowen in the federal Youth 2000 initiative: reduce the incidence of out-of-wedlock births to teenagers by at least 50 percent; reduce the mortality rate for fifteen- to nineteen-year-olds by at least 20 percent; and increase the high school graduation rate to at least 90 percent, all by the year 2000.

## The Chief Communicator

An effective Blueprint for Prevention will require important state resources to be reallocated. In some instances, it may require substantial new investments. Often government agencies and providers will be asked to accept new responsibilities, to adopt new ways of doing business, or to abandon or transfer certain traditional functions. New program designs may threaten established relationships among interest and professional groups.

As chief communicator, the Governor must convince a wide variety of interested parties that the plan is vital and the sacrifices and readjustments are worthwhile. The Governor must convince the public that failure to act is costly, that the investment is important, and that the state can ill afford not to act. The priorities set forth in the state Blueprint for Prevention can be communicated through public announcements, speeches, ribbon-cutting ceremonies at the opening of prevention projects, and other opportunities.

The Governor must inspire each sector and recruit its help to build public support. New information networks will be created and new solutions will emerge. The Governor can work with each sector to create a guide to show how their resources can complement those of others.

## The Chief Executive

Although many different sectors must be involved in the implementation of the Blueprint for Prevention, the Governor has a special responsibility for the actions of state government. As chief executive, the Governor will need to ensure that the wide range of statutory authorities, regulatory practices, and program services are reviewed and perhaps altered to create a framework for action.

The five Bringing Down the Barriers task forces explored strategies that can be used to create new working relationships and to eliminate structural barriers to successful cooperation. The task forces identified a range of responsibilities where state action is pivotal.

One consistent theme emerged from the task forces: the collection and analysis of information needs to be substantially improved. As chief executive, the Governor is uniquely located to take the steps to improve and coordinate the flow of information. This information is used by the state government and communities, and it comes from a wide range of sources. The data collected for the administration and monitoring of individual categorical programs can indicate the flow of funding and provide a useful, but narrow, base of information. More work is needed to develop interactive, integrated information systems that can make it easier to track the effects of the many different programs that address the common issues outlined in this report.

***Establishing the Framework.*** The Governor and the state legislature can also establish the legislative and regulatory framework needed to develop a Blueprint for Prevention. The state can, for example, ensure that state insurance codes do not prohibit health insurance companies from writing policies for non-custodial parents to include coverage for their children. State legislation can also create insurance pools or other mechanisms to expand health insurance to those not now covered.

The state can change criminal laws to strengthen prohibitions relating to the sale of drugs near schools, and it can strengthen civil liability laws relating to the sale or serving of alcoholic beverages. The state can also regulate alcohol distribution through excise taxes on distilled spirits, beer, and wine.

The state can also see that state licensing and certification laws and regulations are reviewed to ensure that practitioners in the classroom, in day care centers, and in treatment facilities are knowledgeable and capable of helping students and clients overcome barriers to self-sufficiency.

The state can establish performance standards for local government and other service providers, and the Governor as chief executive can establish similar standards for state programs and state employees. Understandable standards for educational accomplishment, job placement, literacy, dropouts, and child support collections will focus public attention and establish accountability. Standards also provide the basis for state measures to reward cooperation and effective programs that meet those standards.

**Action and Cooperation.** Finally, the Governor can ensure the direct actions and interagency cooperation that are necessary to implement the Blueprint for Prevention. This can be done, for example, by creating implementation task forces, subcabinet, or interagency agreements for specific tasks, such as coordinating services for welfare recipients.

The Governor, as chief executive officer, can ensure that within his or her own state, the Blueprint for Prevention is molded into the state's unique legislative and organizational framework. Clear goals can be established, progress can be monitored, and rewards can be offered for successful cooperative efforts.

> *"No moral or sensible nation can dare write off a significant portion of its human asset. . . . Our future prosperity now depends in large part on our ability to enhance the prospects and productivity of a new generation of employees that is disproportionately poor, minority, undereducated, and untrained. The budget deficit and the trade deficit pale in comparison to this human development deficit and the national spiritual deficit that permits it."*
>
> MARIAN WRIGHT EDELMAN
> Childrens Defense Fund

> *"A society that sacrifices the health and well-being of its young upon the false altar of economy endangers its own future, and, indeed, its own survival."*
>
> CALIFORNIA SUPREME COURT
> 1974

The traditional measures of government status—the size of one's staff or budget—often discourage coordination and cost reductions and, in many ways, may not be consistent with the goals of the Blueprint for Prevention. As a result, the Governor may want to recognize agency staff who find ways to shift resources from treatment to prevention or to combine funds from different sources. The Governor can also pool project accounts between state agencies for specific programs to reduce barriers; give successful managers greater flexibility; recognize managers who work in cooperative efforts or otherwise perform in desired ways; and allow program heads to reinvest program savings, rather than having savings revert back to the general fund.

Together, these administrative and management changes and redirected resources should help both the state and its communities effectively develop a Blueprint for Prevention.

In addition, Governors can take the lead in developing programs and providing services designed to help others do their jobs better. States can:

- Provide technical support, such as in-service and volunteer training, and disseminate information on successful programs to service providers.

- Ensure that state universities and professional schools are providing a cadre of trained service providers, including doctors, teachers, case managers, treatment providers, and intake workers. Work with the state schools of public health, law enforcement, education, social work, and public administration to ensure that state curriculums focus on prevention. For example, schools of education will need to help new teachers learn how to involve parents effectively in the education of their children.

- Pool funds from different state agencies to implement different portions of the Blueprint for Prevention, and direct these funds to community programs.

The suggestions for creating the Blueprint for Prevention cast a wide net, and the Blueprint should eventually touch all parts of state machinery. Yet, to start is not difficult. It can be as simple as having the human resource agency and the education department sit down together to identify the pools of money that are currently being provided to communities in the state through a competitive bid process. Together the agencies can develop joint efforts. Time can be set aside so staffs from different agencies share information with their counterparts. As common problems are identified, common challenges emerge.

### PROJECT FLAGSHIP

**Through Project Flagship, United Way of America gathers standardized agency and program data on client characteristics, agency funding source, and staffing patterns. The data is more specific and allows better comparisons than most other data. The program began in 1982 and now involves twenty-five test entities and provides information on more than 2,500 human care agencies administering over $2.6 billion in funds—about one-fourth of all funds spent by voluntary human service funds tracked by United Way.**

**The project ultimately hopes to involve 300 communities to achieve a national database. State officials can use the data when allocating resources, setting priorities, and developing human service delivery systems. The data permits officials to monitor changes in the nature of the public-private partnerships that support human services. Data can show federal, state, and local government programs that are supporting specific services in the voluntary sector and the types of clients that are being served.**

**Participants can use Project Flagship to make better local decisions about programming and resource allocation. The project emphasizes agencies supported by United Way, but it plans to expand to cover other agencies.**

# THE 5 PERCENT CHALLENGE

*". . . There is proof of our ability to improve the lives of millions of vulnerable American children, while reducing the need for later and more costly expenditures. . . The fact is that we already know enough to use public policy to benefit children, and do so in a way that returns funds to the federal treasury. We have been able to reduce infant mortality, overcome early learning deficiencies, and provide early educational access for handicapped children. . . . By not reaching out to the [millions of] unserved children, we are foregoing opportunities for new successes as well as burdening future taxpayers with more costly public expenditures."*

1985 REPORT OF THE HOUSE SELECT COMMITTEE ON CHILDREN, YOUTH, AND FAMILIES

*"Home life is the highest and finest product of civilization . . . the great molding force of mind and character."*

1909 WHITE HOUSE CONFERENCE ON CHILDREN

At the most fundamental level, creating a Blueprint for Prevention that invests in people and seeks to prevent serious barriers will require change—change in the way problems are considered, change in the institutions and systems that attempt to solve them, and change in the way resources are allocated.

To focus attention on the needed change and to ensure that funds are available to begin an investment strategy that can bring down the barriers to self-sufficiency and productivity, the Governors suggest The 5 Percent Challenge. This challenge is to ensure that at least 5 percent of the state's total resources are reallocated toward prevention efforts outlined in the state's Blueprint for Prevention and the state action agendas that flow from it.

However, state government acting alone is not enough. Local units of government, schools, the voluntary sector, and the private sector also need to accept The 5 Percent Challenge. States may want to create Challenge Grants that can be awarded to communities that are prepared to focus more of their resources on prevention and the implementation of programs to bring down social barriers. Many of these prevention efforts are outlined in the task force reports that follow.

By forging collaboration and a common resource pool through The 5 Percent Challenge and through Challenge Grants to localities, a state can begin the investment in its Blueprint for Prevention and begin bringing down the barriers to self-sufficiency and productivity.

Wise leadership, renewed community concern, and coordinated prevention efforts can ensure that all Americans once again have the opportunity to participate in a life of hope and financial security.

# WORKS CONSULTED

Berlin, Gordon, and Sum, Andrew. 1987. *American Standards of Living, Family Welfare and the Basic Skills Crisis.* Washington, D.C.: National Governors' Association Center for Policy Research. March 1987.

Berrueta-Clement, John R.; Schweinhart, Lawrence J.; Barnett, W. Steven; Epstein, Ann S.; and Weikart, David P. 1984. "Changed Lives: The Effects of the Perry Preschool Program on Youths Through Age 19." High/Scope Educational Foundation, monographs, vol. 8. Ypsilanti, Mich.: High/Scope Press.

Catterall, James S. and Stern, David. 1986. "The Effects of Alternative School Programs on High School Completion and Labor Market Outcomes." Educational Evaluation and Policy Analysis 8. Spring 1986:77–86.

Center for Population Options. 1987. "Estimates of Public Costs for Teenage Childbearing." Washington, D.C.: Center for Population Options. May 1987.

Children's Defense Fund. 1986. *Maternal and Child Health Data Book: The Health of America's Children.* Adolescent Pregnancy Prevention: Prenatal Care Program. Washington, D.C.: Children's Defense Fund.

Children's Defense Fund. 1987. *A Children's Defense Budget, FY 1988: An Analysis of Our Nation's Investment in Children.* Washington, D.C.: Children's Defense Fund.

Earle, Janice, and Roach, Virginia, with Fraser, Katherine. 1987. "Female Dropouts: A New Perspective." Alexandria, Va.: The Youth Services Program, National Association of State Boards of Education.

Hayes, Cheryl D. 1987. *Risking the Future: Adolescent Sexuality, Pregnancy and Childbearing.* Washington, D.C.: National Academy of Sciences, National Academy Press.

Hofferth, S.L., and Moore, K.A. 1978. "The Consequences of Age at First Birth: Family Size." Working Paper No. 1146–0Z. Washington, D.C.: The Urban Institute.

Jungeblut, Ann, and Kirsch, Irwin S. 1986. *Literacy: Profiles of America's Young Adults.* Report No. 16–PL-OZ. Princeton, N.J.: National Assessment of Educational Progress, Educational Testing Service.

National Center for Education Statistics. 1982. *Preprimary Enrollment, 1980.* Washington, D.C.: U.S. Department of Education.

National Association of State Alcohol and Drug Abuse Directors (NASADAD). 1984. *Alcohol and Drug Problem Costs, Programs and Services.* Washington, D.C.: National Association of State Alcohol and Drug Abuse Directors.

Office for Substance Abuse Prevention. 1987. "Prevention: From Knowledge to Action." Alcohol, Drug Abuse and Mental Health Administration, U.S. Department of Health and Human Services. Supporting Works for Task Force on Alcohol and Drug Abuse Prevention. Washington, D.C.: National Governors' Association. July 1987.

Schweinhart, Lawrence J. 1985. "The Preschool Challenge." High/Scope Early Childhood Policy Papers, No. 4. Ypsilanti, Mich.: High/Scope Press.

Sum, Andrew, and Taggart, Robert, with Berlin, Gordon. 1987 Forthcoming. *Cutting Through.* Project on Social Welfare and the American Future. New York: Ford Foundation.

U.S. Congress. House Committee on Ways and Means. 1987. *Background Material and Data on Programs Within the Jurisdiction of the Committee on Ways and Means: 1987 Edition.* WMCP: 100–4. Washington, D.C.: 100th Congress, First Session. March 6, 1987.

U.S. Department of Commerce, Bureau of Economic Analysis. 1986. Unpublished data on fiscal 1986 spending on general assistance and state health obtained through state survey. Washington, D.C.

# TASK FORCE ON WELFARE PREVENTION

# TASK FORCE ON WELFARE PREVENTION

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*Governor of Vermont*

*"I was on welfare for seven years with my son Brian. We went on welfare because when I got pregnant I had no training. I was only 17."*

*"I went on welfare at the age of 18. I got pregnant at that time. The guy I got pregnant for just got me pregnant and left me all alone to take care of a baby."*

*"The welfare system was a significant part of my life for about eighteen and a half years. I guess you could say I was born into the welfare system. My mother was a single parent who only received two dollars per week in child support payments and had to turn to the welfare system for support. She made many attempts to get off welfare but the only jobs she could get were jobs without the medical coverage. So for my benefit, she decided it was better to stay on welfare and have my health protected."*

*"In my life I was involved in nothing. I had problems out of my children. I went to welfare but I did not like welfare because it was a hassle."*

Fictional lines from fictional people? No, these are words spoken with passion and candor by four women who, for varying amounts of time during their lives, experienced firsthand the frustration, the hopelessness, and the sense of limited options that characterize the welfare system of the 1980s.

After listening to these women and reviewing their own state's experiences, Governors on the Task Force on Welfare Prevention concluded that it doesn't have to be this way, that it is possible to turn what is now perceived as a "dead-end" maintenance system into a system that maximizes every individual's opportunity for self-sufficiency.

When President Franklin Roosevelt addressed the U.S. Congress in 1935 to advocate enactment of the Social Security Act, he said Social Security would be more than a retirement program; it would, in fact, provide income insurance for every stage and condition of life. When Congress enacted this legislation, the country was in the midst of the Great Depression and the most important feature of the act was unemployment compensation.

Several titles in the new act were designed specifically to provide temporary assistance to people until the various insurance provisions took effect. The Title I Old Age Assistance program was designed to help the elderly until the Old Age Insurance provisions were fully implemented. The Title IV Aid to Dependent Children program was designed to provide assistance to widows and orphans who did not qualify for Survivors' Insurance.

When Aid to Dependent Children was enacted in 1935, the typical recipient was perceived to be a coal miner's widow and her orphan children. Payments were designed to maintain a widow and her children in accordance with the prevailing societal belief that it was best for a woman to stay home and raise her children.

In the relative scheme of things the Aid to Dependent Children program, intended to be a bridge to a fully matured Survivors' Insurance program, was considered so insignificant to the original act that only two lines of the President's message to Congress were devoted to it. However, unlike old age assistance, which did wither as the Social Security retirement benefits system matured, the Aid to Dependent Children program grew (Moynihan 1987, 3–4). In 1940, 360,000 families received its benefits (Cloward and Piven 1972). In 1986, the average monthly caseload for the program, now known as Aid to Families with Dependent Children or AFDC, was 3,747,000 (U.S. Congress 1987).

## Changing Times, Changing Attitudes

Today there are important differences both in the characteristics of the AFDC population and in the societal beliefs that underlie the system. The American family has changed and the changes have contributed to the growth of the program. Today only a minority of American children may expect to reach age eighteen having lived continuously with both their natural parents. Sixty percent of children born today may expect at one time or another to live in a single-parent family, 90 percent of which are headed by females. Divorce accounts for 68 percent of single-parent families, separation 8 percent, illegitimacy 20 percent, and death of a spouse only 3 percent (Moynihan 1987, 5–6).

Unless major changes are made in the current welfare system, it has been estimated that between one-fourth and one-third of the children born today will be "on" AFDC before they reach maturity (Moynihan 1987, 6, and Children's Defense Fund 1987, xii). The mission and structure of the AFDC program must be re-examined in light of the changing needs of the 3.7 million adults and 7.2 million children it serves (U.S. Congress 1987).

A comparison of the AFDC population in 1969, the first year for which comprehensive data is available, and 1986, the most current year for which it is available, reflects the changing nature of the population. In 1969, 43 percent of AFDC adults were divorced or separated; in 1986, 36 percent were divorced or separated. In 1969, 28 percent of the AFDC adults were never married; in 1986, 46 percent were never married. In 1969, 6 percent of the AFDC adults were widowed; in 1986, 2 percent were widowed. The AFDC program does not serve primarily widows and orphans. Increasingly, it serves single mothers, particularly unwed mothers in their teenage years. (U.S. Congress 1987).

### ARKANSAS

[illegible]

## Women in the Workforce

Societal attitudes and realities about women's participation in the labor market have changed. The Bureau of Labor Statistics reports that 62 percent of all mothers with children under the age of eighteen now work outside the home. In 1969, only 39 percent of mothers with children under the age of eighteen worked outside the home. In 1986, there were 9 million children under six whose mothers worked, and that number is expected to rise to 14.6 million by 1995 (CDF 1987). Of all mothers with children under the age of six, 33 percent work full time, 15 percent work part time, and 52 percent don't work outside the home. Of all mothers who are divorced with children under the age of six, 50 percent work full time, 14 percent work part time, and 36 percent don't work outside the home. Of all mothers who never married with children under the age of six, 23 percent work full time, 8 percent work part time, and 69 percent don't work outside the home. Increasing numbers of women, even women with young children, are in the workforce (U.S. Congress 1987).

Given these dramatic changes, it is not surprising that the AFDC program does not command stable political support. A program designed for poor widows will not be supported in a world where mothers are poor because their former husbands don't support them or because they are unmarried. A program designed to pay mothers to stay at home with their children cannot succeed when working mothers are the norm.

## Historical Mission, Present Realities

The current interest in welfare reform has been spurred by ambivalence about the program's design and purposes, massive federal deficits, and serious state fiscal difficulties. The lack of congruence between the program's historical mission and present attitudes and realities with respect to working women, as well as successful state experiences with AFDC employment programs, were a factor in the Governors' decision to propose significant changes to the current welfare system.

Other facts about the current AFDC population also speak to a need for change. Adults who receive AFDC are not a homogeneous group. They are diverse, with differing needs, resources, and circumstances. For instance, the length of time an adult receives AFDC varies widely. Program statistics suggest that of the people approved to receive welfare in any quarter, about half will leave the rolls in six months or less. Of those remaining for six months, almost 25 percent will leave by the end of the first year, and more than

### MASSACHUSETTS

[illegible]

55 percent will receive assistance for less than two years.

However, this pattern of rapid movement drops markedly after the first two years. Of those who still receive AFDC at the end of two years, more than 50 percent will receive assistance for at least two more years, and more than 25 percent will receive assistance for ten years or more. Clearly those who do not achieve self-sufficiency in the first two years of dependency find it increasingly difficult to do so. (U.S. Department of Health and Human Services 1983)

For those who are most at risk of long-term dependency, there are some startling links with other social barriers being studied by NGA task forces. For example, a 1987 California study examined the link between education and welfare dependency. It found that of welfare recipients in the state's welfare-to-work program, about a third had such weak basic literacy and computational skills that, under program guidelines, they needed remedial education for six to twelve months as part of their employability development program (CASAS 1987).

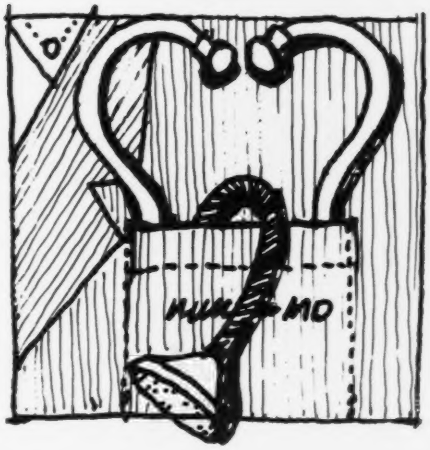
Three-fifths of all adults on AFDC have not graduated from high school, and at least one-fourth have no work experience. An Educational Testing Service study concluded that more than half of all who had to register for work to receive AFDC had reading and math skills below the eighth- or ninth-grade level, which effectively barred them from many entry-level jobs (CDF 1987, 103).

The link between teenage pregnancy and welfare dependency cannot be ignored. In fiscal 1983, over half of the $12 billion spent by the federal government on AFDC went to families in which the mother had her first child as a teenager (Moore and Wertheimer 1984). Sixty-one percent of AFDC recipients younger than thirty began their childbearing as teenagers (CDF 1986, 11). Further, 60 percent of all teenage mothers receive public assistance at some time.

## OHIO

[illegible]

## The Costs of Dependency



The social and economic costs of dependency are increasing. Public assistance programs now are made up of increasing numbers of unwed mothers, particularly in their teenagers. For these mothers, in particular, the lack of adequate pre- and postnatal care for them and their children increases long-term health costs and creates additional barriers to self-sufficiency.

Moreover, increasing numbers of children born into two-parent families will live with a single parent at some point during their childhood as a result of divorce or separation. And while improvements have been made, the child support system does not yet guarantee that absent parents will meet their responsibilities for support of their children.

While the current welfare system provides important short-term, transitional assistance to millions of mothers and their children, many others face long-term dependency. The Governors are convinced they can and must take steps to address these problems, to increase prevention efforts so that adequate resources will be available for all poor families during periods of transition, and to meet the needs of those who are truly unable to become self-sufficient.

The Governors conclude that two basic changes must occur in the structure of the nation's human service system:

- Change the welfare system from a maintenance system to a doorway to real opportunity for independence; and

- Redirect human service systems so they invest in prevention in a systematic and significant way, that does not neglect treatment.

# ELEMENTS OF A STRATEGY

A comprehensive redirection of the welfare system must address two diverse but interrelated groups. First, it must help adults and children who already receive public assistance. This strategy would turn what is now primarily a payment system with a minor work component into a system that provides real opportunity and incentives for individuals to get the education, training, and support they need to seek, find, and maintain jobs. These elements are encompassed in the welfare reform policy adopted by the National Governors' Association in February 1987.

Second, redirection of the welfare system must focus on the nation's children. For them, key strategic prevention initiatives can mean the difference between despair and the path toward healthy, productive, fulfilling lives.

## Leading Adults to Self-Sufficiency

For adults who now receive public assistance, the key elements include a program that offers remedial education, training and job opportunities, and the kind of ancillary services like child care and transitional health care coverage that provide a meaningful opportunity for people to move into the economic mainstream.

***Remedial Education.*** Statistics show that many who currently receive public assistance do not have the basic skills needed to compete effectively in the job market. Any program that seeks to provide individuals with real opportunities for independence needs to offer a range of remedial education services. These could include efforts to help individuals finish high school, attain a General Educational Development (GED) certificate, acquire basic reading, writing, and communication skills, and achieve competency in the English language.

***Training.*** Programs need to offer a wide range of training, from specific occupational skills to job-readiness training that teaches skills such as filling out job applications, preparing resumes, and dressing appropriately for work. They need to develop positive work attitudes, and help recipients cope with other life management issues. Training programs should be designed to lead to long-term employment and economic mobility.

***Job Opportunities.*** An array of job opportunities should be offered and attention must be given to employment counseling and job development. Successful job placement and retention requires not only a well-trained and motivated group of workers, it also demands a strong and competitive economy with a continuing supply of diverse jobs. For this reason, the work of the Task Force on Jobs, Growth and Competitiveness is a critical component of state efforts to prevent the need for welfare.

***Support Services.*** The most successful training and employment programs offer critical support services that increase the likelihood of their successful participation in the program and, eventually, in the job market. Critical services include:

- Quality, affordable child care for those clients who need it. The mother needs to concentrate on her training and, eventually, her job, and her children need a safe, loving environment that helps foster their social and educational development. For these reasons, child care is a major component in a successful welfare-to-work strategy.

- Access to affordable health care. People who receive income assistance also get Medicaid health care. The prospect of losing Medicaid coverage to take a minimum-wage job without health insurance can be a major disincentive to work. Some approaches to providing alternative health care coverage include designing flexible benefit packages to provide coverage that is less extensive than traditional Medicaid coverage, using state employee benefit plans for newly employed welfare clients, and developing strategies to provide coverage through comprehensive Health Maintenance Organizations.

- Transportation. The cost of transportation can be substantial and steps must be taken to ensure access to a training and employment program and jobs, particularly in rural areas where public transportation may not be available.

***Case Management.*** People have a wide range of needs, resources, and family circumstances. Clients who have succeeded in leaving income assistance say that having one person who cared and who helped them through the maze of programs was a key to their success. Case management is an attempt to provide that link that can lead to self-sufficiency. Case managers can perform two roles. First, the case manager will work with the client to develop an "independence" plan that recognizes the client's needs and maximizes the client's individual resources. Second, the case manager will manage and broker the services that can help the client achieve self-sufficiency.

***The Social Contract.*** Once a case manager and a client agree on an independence plan, the obligations and responsibilities of both the client and government should be spelled out in a contract. The contract is the tangible sign that responsibility for independence flows two ways—the client will work through the steps in the independence plan, and the government will invest in the employability of the client by providing the necessary services.

## Reaching Out to Children: Prevention

For children, the challenge is to prevent the cycle of dependency from claiming another generation. Key elements of a sound prevention strategy for children include ensuring adequate health care, nutrition, family nurturing, and educational, social, and physical development.

***Prenatal Health Care.*** Prenatal care, including medical care, nutrition, and healthy life habits, is truly an ounce of prevention worth a pound of cure. Research has shown that $600 invested in early, comprehensive prenatal care saves not only babies' lives, but also saves money by preventing the need for neonatal intensive care (which costs up to $1,200 a day to save very low birthweight babies) and long-term health care costs for babies born with developmental disabilities (CDF 1987).

Early and continuing maternity care is essential. It should include regular medical exams and treatment, nutrition counseling and the food to provide a healthy diet, and safe and appropriate delivery and support services.

There is evidence that prenatal care can reduce mortality and low birthweights among infants by more than 25 percent. Children born to mothers who receive no prenatal care are three times more likely to die in their first year of life than are other babies. Low birthweight babies are twenty times more likely to die in their first year of life and face a significantly higher risk of suffering permanently handicapping conditions. For every dollar spent to provide prenatal care, society saves more than $3 in the first year of an infant's life and up to $11 over the lifetime of a child. (CDF 1987)

### FLORIDA

The Improved Pregnancy Outcome (IPO) program works through the state's Department of Health and Rehabilitative Services to provide prenatal care for indigent women and for women at risk of delivering low-birthweight babies. Services include home visits, prenatal care in clinics, nutrition assessment and counseling, assistance in arranging delivery, regular checkups, risk assessments, and instruction in how to recognize the symptoms of preterm labor.

The Preterm Prevention Program focuses intensive services on particularly high-risk pregnant women. The program was implemented through a statewide training program in preterm birth prevention techniques for health workers, nutritionists, and social workers.

IPO conducts intensive outreach through a statewide media campaign and telephone hotline to encourage early access to regular prenatal care, and through ten model projects that are developing methods to determine why women do not use care early, and incentives to encourage early access.

**Children's Health Care.** Children need decent health care at every stage of development. Good health care begins with comprehensive care early in the mother's pregnancy, throughout labor and delivery, and continues throughout childhood, with care for a child's preventive, acute, and chronic health needs. Comprehensive health care is crucial throughout the teenage years as well, to protect both the physical and emotional health of young people.

Preventive and primary health care for children can detect and treat problems that develop early during infancy. Health professionals have found that as many as 80 percent of low-income children suffer from one or more untreated medical problems. Untreated vision, hearing, and dental problems, anemia, and developmental conditions can impair a child for life. Children who receive comprehensive pediatric care, including preventive services, have annual health care costs nearly 10 percent lower than children who do not receive such care. (CDF 1987)

Providing primary and preventive health care is expensive but it costs less—both in economic and human terms—to prevent illness and hunger than it does to treat the results.

At a minimum, primary and preventive health care should include:

- Well-baby clinics that provide early, periodic screening, diagnosis, and treatment;
- Full immunization against all preventable childhood diseases;
- Supplemental nutrition assistance;
- Extending Medicaid coverage to women and young children with family incomes less than the federal poverty level but over a state's AFDC eligibility levels; and
- Comprehensive adolescent health care services.

> *"So I think we have to spend some time developing a good child care system for children as young as six weeks. I think it's very beneficial for not only the parent, but also for the child, because the earlier out of the home, the earlier involved in the educational process, the better chance the child has to make it."*
>
> REBECCA VARELLA
> Delaware

Medicaid, the nation's largest public health financing program for families with children, still excludes millions of poor children from valuable services because of ties to AFDC eligibility rules. For example, a family with a full-time working father, mother, and two children often would be excluded from Medicaid, even if the father is working at a minimum-wage job with no health insurance and the family's income is well below the poverty line. As state welfare eligibility levels have declined relative to poverty over the last decade, the proportion of poor and near-poor covered by Medicaid has dropped from 65 percent to only 46 percent of the total poor population. (CDF 1987)

**Family Resource Programs.** The American family structure has changed over the last fifty years and many young parents feel a sense of isolation and frustration as they try to work and successfully raise children. Parents need to know that they are not alone and that the larger community will support their efforts.

Diverse, independently funded programs have quietly emerged in the last ten years in all kinds of communities to address these needs. Family resource programs can offer parents education, information, advice, and emotional support. Common characteristics of these programs include:

- child development classes;
- information and referral services;
- nutrition counseling;
- hotlines;
- peer support groups;
- parent-child communication skills; and
- positive discipline techniques.

**Child Care.** Child care is a critical ancillary service as individuals move from welfare dependency to independence. It is also a critical element in a prevention strategy for children. Quality child care not only provides a safe environment for children while their parents participate in training or work; it also offers valuable education and socialization opportunities.

What constitutes quality child care? Research suggests the following elements of a "quality" child care program: small group size, high staff-to-child ratios, good health and nutrition standards, parental involvement, and training requirements for care-givers.

Further, as child care strategies are developed, states need to address child care needs in a cohesive, coordinated effort that uses unified standards of availability, quality, and affordability.

**Recreation.** Marian Wright Edelman, president of the Children's Defense Fund, calls this element "constructive engagement in recreation." It is important to provide young people with a variety of healthy, positive outlets for their energy. Some of the most successful treatment programs for teenagers are built around the simple yet powerful notion that youth need positive ways to use their free time.

Recreation activities can range from community-sponsored sports teams to sandlot baseball supervised by parents. Organized sports; wilderness programs, including camping and hiking; community theater; music programs; and "block" dances and carnivals can offer positive experiences for young people.

Greater Avenues for Independence (GAIN) offers a series of components designed to increase welfare recipients' opportunities for employment. The comprehensive program requires ongoing review of each client's progress to ensure that each client receives a specific set of services.

Each county [illegible] and operates the GAIN program in accordance with state-approved regulations. Counties assess the needs of the local county and caseloads, and take an inventory of existing services. Counties work closely with local businesses, [illegible], and other agencies to provide a range of services that respond to local needs.

AFDC recipients are required to participate in education, job search, or training programs that lead to unsubsidized employment. Supportive services, such as child care and transportation, are provided.

Participants [illegible] with education before or during the initial phase of the program. Those who have [illegible] in two years participate in a three-week job club [illegible] have been employed in the two previous years may choose between a job club and supervised job search, and those [illegible] and two or more [illegible] go directly to a [illegible] assessment in which participants are tested for aptitude, interest, and [illegible] and evaluated for previous job experience. Based on the assessment, an employability plan is developed. The county department and the participant enter into a contract. The participant agrees to [illegible] specified program activities and the county agrees to provide the necessary employment-related and supportive services. Participants may choose from numerous options, including vocational training, on-the-job training, and short-term work experience in public and private nonprofit organizations.

The state has contracted with a private firm to develop and implement a marketing strategy to promote GAIN among welfare recipients, the business community, and the public.

***Child Care Programs.*** **Many innovative child care programs operate in California.**

- **State Preschool.** State preschool programs provide a part-day comprehensive developmental program for three- to five-year-olds from low-income families. The program includes educational development, health services, social services, nutrition services, parent education and participation, evaluation, and staff development.

- **Resource and Referral.** Resource and referral programs provide information to parents about available child care and coordinate community resources to help parents and local child care providers.

- **Programs for Parents.** School-Age Parenting and Infant Development (SAPID) provides parent education and career development to parents of secondary school children. Located on or near school campuses, these programs also provide child care for children while the parents complete their education. These programs are currently operated by public high schools and county offices of education.

- **Extended Day Care.** Extended day care programs offer a safe environment with appropriate activities for children of different ages and developmental stages. Programs are offered before and immediately after the normal school day.

- **Preschool Career Incentive Grant.** This program provides complete or partial reimbursement to staff working directly with preschool children for completed college course work in early childhood education.

- **Special Projects.** This program funds the Community/State College Consortium training program, which offers accredited classes to help providers meet training requirements.

> *"Probably the thing that would have helped me get off welfare a lot sooner was if there was a program that I could trust that could help me acquire marketable skills, instead of just trying to push me off the welfare rolls and just leaving me high and dry. Because most positions that don't require any training don't have the benefits you need to raise a family."*
>
> LILLIE HARDEN
> Arkansas

## For Adults and Children

There are two additional elements that are critical for both adults on income assistance and their children.

***Child Support Enforcement.*** No strategy for familial independence can be complete without a strong child support system that reinforces the belief that parents have the primary responsibility to support their children and must make every effort to do so. Mother and father must share this responsibility. Therefore, in cases where one parent, usually the father, is absent from the home, aggressive measures such as locating the absent parent, determining the amount of payment, establishing equitable guidelines to ensure adequate support for children, coordinating efforts across state lines, and collecting payments once they have been ordered by the courts must be taken to ensure support.

***Income Assistance.*** In their welfare reform policy, the Governors explicitly recognize that an adequate level of cash assistance must be provided both for clients who cannot be expected to work as well as for those who are working toward independence. As savings begin to accrue from the prevention-oriented training and employment initiatives, the Governors envision funding an income support system that more efficiently and effectively covers the basic cost of living for individuals within the different states.

The Governors recommend an income assistance program that uses a national methodology to establish a "market basket" of the components necessary to ensure a safe and healthy living environment, including shelter, food, health care, and clothing. Using this national methodology or formula, each state can use state-specific costs to derive its own family living standard. A state's benefits would be set at a nationally prescribed percentage of its family living standard, with the ultimate goal being 100 percent of the family living standard either in whole or as a supplement to resources a family receives from work and/or child support.

### MICHIGAN

**The Michigan Opportunity and Skills Training (MOST) program operates through the Department of Social Services to promote the economic independence of welfare recipients through job search, education, vocational training, on-the-job training, and community work experience. All able-bodied AFDC and general assistance recipients are required to participate in the program unless specifically exempt. Clients are assessed and assigned to the program that best fits their needs. Clients with a recent connection with the work force or with marketable job skills are placed first in job search activities. Clients who lack a recent connection with the work force or marketable job skills may be placed in on-the-job training for up to six months, or in educational programs, including high school completion, GED, remedial education, and limited postsecondary education. For recipients who do not obtain a job after educational training or on-the-job training, job search or job club activities are offered. Those who still do not obtain an unsubsidized job or those who have never worked are required to participate in community work experience.**

**MOST participants receive support services and special allowances for work-related expenses.**

# AGENDA FOR STATE ACTION

> *"My children are proud of me, they just almost throw me out the house, you know because I can do so much more for them."*
>
> LILLIE HARDEN
> Arkansas

> *"I graduated and I went on and now I'm here. And I'm here because of a support network . . . people who cared . . . it was childcare and it was a lot of individual counseling for low self-esteem. . . ."*
>
> REBECCA VARELLA
> Delaware

Developing an action agenda for welfare recipients or an agenda to prevent dependency in succeeding generations of children requires the same basic steps. Four critical factors underpin any successful Agenda for State Action to implement new approaches to difficult human problems: leadership in the Governor's office; creative reallocation of existing funds and pooling of funds from multiple sources; broad interagency collaboration; and involvement of public and private individuals and institutions at the community level.

## VERMONT

**The REACH UP welfare-to-work initiative is jointly administered by the Human Services Agency and the Department of Employment and Training, and includes the Department of Education. The program pools financial and program resources from the state, [illegible] service, Job Training Partnership Act and Vocational Education programs, through non-financial agreements among the [illegible] agencies, and from community-based organizations, through their receipt of job training and/or vocational [illegible] funds targeted to low-income single parents. Targeting [illegible] pooling of these existing financial and service delivery system resources are [illegible] to the success of REACH UP's effort to do a better job of helping AFDC parents prepare for and obtain jobs which will enable them to become independent of welfare.**

**REACH UP is a voluntary program for single parents. Each person is assigned a case manager. The focus is on the individual's needs and helping him or her identify, plan, and reach goals. Assistance in pursuing child support is also provided where appropriate. Services include counseling, vocational training and education, child care, transportation, GED preparation, pre-vocational planning for those who are not ready for institutional training, on-the-job training, work experience, job search, and job placement. The target group for participation is single parents with school-aged children who have been on welfare at least one year. Participation by the unemployed parent in two-parent AFDC families is mandatory.**

## 1

## Create a Population Profile

- Assess the affected populations by collecting information on who constitutes the current welfare population and the children at risk.

- Ask questions about current recipients, such as: How many people are being served? How many recipients are teenage parents? How many recipients have been receiving assistance for two years or longer? How many recipients are employed? Part time? Full time? How many recipients have access to child care? Transportation? Health insurance?

- Ask similar questions about children: How many children are there in the state and what are their ages? What is the composition of the families in which these children live? Single-parent families? Two-parent families? What is the income breakdown of the families with children? How many children live in households with one and/or two working parents? How many children are in center-based day care? Family-based day care? More informal care arrangements? How many children are without apparent adult supervision? How many children are receiving health services and what kind are they receiving? How many children are fully immunized?

### MISSOURI

Each school district in the state offers the Parents As Teachers (PAT) program to expectant parents and to parents with children under age three. The program consists of in-home visits by parent educators; group meetings for parents with similarly aged children at Parent Resource Centers; periodic screening of a child's educational, hearing, and visual development; and publications with timely, practical information and guidance in improving children's development skills. This program is offered to parents regardless of income.

The program was authorized statewide by the Early Childhood Development Act of 1984. The Department of Elementary and Secondary Education, in cooperation with the Commissioner of Education's Committee on Parents as Teachers, operates the program.

Initially a demonstration project in four school districts, major funding for the project was provided by several foundations and corporations. An independent evaluation found the demonstrations to be highly effective in increasing scores on a nationally known test of intelligence, achievement, auditory comprehension, verbal ability, and language ability.

*Child Support.* An expedited administrative process is used to establish new child support orders and enforce existing orders. The child support enforcement agency administers the program, using special investigators. The investigators discover income, use a scaled formula to derive an amount owed, develop a petition for an award, and serve the petition to the absent parent via certified mail, a sheriff, or private process. The absent parent can file an appeal, which is handled through a negotiating conference with the investigator and custodial parent or an administrative hearing.

*"I always wanted to be independent."*

LILLIE HARDEN
Arkansas

*"For them, welfare becomes not a temporary crutch, but a way of life. An abusive and abused parent."*

KEN AULETTA
Journalist and Author, New York

## 2
## *Identify Existing Programs*

■ Determine how much is being spent, for which populations, and for what programs and purposes.

■ Survey and catalog the programs currently in operation, the agencies (public or private, state or local) operating them, their service capacity, and their funding sources. This activity is a vital prerequisite to the process of imposing executive-level coordination between state programs, and in creating opportunities to pool and reallocate funds to support a more comprehensive action plan.

■ Use the catalog of programs to identify gaps in the existing array of services and as the baseline upon which a full continuum of prevention and intervention services can be built.

■ Use the catalog of programs as a resource guide so that communities can make informed decisions about adopting other communities' programs, as well as figuring out how to link services together.

## 3
## *Set Priorities*

■ Set priorities among the groups to be targeted for services and/or among the communities with persons who need assistance.

■ Develop measurable goals and objectives for both the welfare-to-work strategy and the prevention initiatives. These goals and objectives provide the framework for an incremental series of steps to achieve a comprehensive action plan. For example, the state goals for a welfare-to-work plan could be to provide, by 1990, comprehensive education and training services to 75 percent of teenage parents who receive income assistance and to provide, by 1992, comprehensive education and training services to 100 percent of these teenage parents. For the children's prevention initiative, goals could be that, by 1990, 75 percent of all pregnant women will have access to comprehensive prenatal care; and by 1992, 100 percent of all pregnant women will have access to such care.

### *DELAWARE*

**The state has a well-developed child support enforcement system. The Division of Child Support Enforcement is the agency that helps custodial parents obtain child support. In 1986, the division helped collect more than $[illegible] million in child support and established or enforced more than 3,000 support orders. The division has a staff of caseworkers, attorneys, and accounting personnel that helps custodial parents establish and enforce orders and collect support payments. The staff has increased from fifty-nine in 1983 to eighty-eight today. New federal and state laws are now being used to crack down on delinquent absent parents. The division works to ensure that all children receive the support to which they are legally entitled.**

**A year ago, Delaware moved out to build a sophisticated computer system in the child support field. A computer link has been established to provide access to 340,000 wage and unemployment records, 500,000 motor vehicle licenses and vehicle registrations, and 220,000 Department of Health and Social Services clients.**

**Delaware uses state-developed guidelines to establish levels of child support awards from absent parents. These guidelines are based on net income, and require the absent parent to prove that the child support award is unfair. Income above the amount for the absent parent's basic needs is divided equitably between the parent and the children.**

## 4

## Mobilize

- Develop a full Agenda for State Action compatible with the state's needs, resources, and priorities. Draw on the strategies defined in this chapter. Be armed with information about the high costs of failing to act.

### For Welfare-to-Work Strategies

- Determine which groups of people at the local level (families, religious organizations, schools, social service agencies, public assistance agencies, public health agencies, employment agencies, community organizations, business, and industry) are necessary to implement specific strategies and ask them to prepare plans for coordinated delivery of critical services.

- Get communities involved in job training and job development strategies. Focus special attention on bringing local schools, social service agencies, and local businesses together to develop coordinated approaches to educational remediation, job training and job development. Ensure that local case managers meet with these community action teams early in the planning process.

### For Prevention Strategies

- Challenge communities to prepare coordinated approaches to implement the state's goals for children.

- Challenge schools, health clinics, private pediatricians, and family resource centers to develop campaigns around a particular theme or strategy. For example, these groups might develop a campaign to ensure that all children in their community have access to an adequate and nutritious diet and that the families of these children have access to nutrition counseling.

### NEW JERSEY

**Realizing Economic Achievement (REACH) is an effort to reform and revitalize the state's welfare system. The Department of Human Services is the lead agency for REACH, which features a mandatory, comprehensive educational, training, and employment program for all AFDC recipients, while targeting the prevention of long-term dependency on young welfare mothers. New Jersey's twenty-one counties structure the employment, training, and support service components of the program through local planning within state-set parameters.**

**REACH offers a core set of services to each applicant with children over two years of age. These services include job search, training, education, and work experience. Recipients are offered support services, including child care, Medicaid extension, and reimbursement of training-related expenses. Vocational counseling and assessment are provided to applicants with children under two years of age.**

**Each recipient is required to enter into a contract with the state. The contract formalizes an agreement detailing the employment, education, and training activities the client will pursue and the services the state will provide to support these activities. This contract outlines the path the client will travel to reach economic independence, and is the basis of the REACH program.**

***HealthStart.*** **In response to evidence that poor pregnant women and young children are at higher risk for poor birth outcomes and serious child health care problems, this program is designed to target the unmet needs of this high-risk group. The program is available to an estimated 25,000 pregnant women and 43,000 eligible children under the age of two. The program takes advantage of extended Medicaid eligibility for pregnant women and children.**

**Participating providers are required to offer health support services, such as nutrition counseling, health education, and various social services. The providers will also monitor their HealthStart patients and provide the necessary follow-up care. Fees for these additional services will increase substantially under this program.**

**Over the long-term, HealthStart is expected to result in substantial cost savings because fewer children will require neonatal hospital care, special education, and other long-term supportive services.**

***Child Support Guidelines.*** **In 1986, the New Jersey Supreme Court released child support guidelines based upon the concept of "income shares," which allocates the proportion of disposable income that normally would have been spent on the children in an intact family. Following a pilot project implementing these guidelines, which indicated a significant discrepancy between current child support orders and the amount absent parents should pay according to the guidelines, the project was expanded to nineteen counties.**

> *"At the work program I learned how to fill out an application, how to go on an interview, and sell myself to an employer in order to get a job."*
>
> LILLIE HARDEN
> Arkansas

## 5
## *Act*

- Communicate the state's goals, both for self-sufficiency for adults and prevention for children, clearly and forcefully to the legislature, the communities, local governments, and the private sector.

- Spell out the high costs of failing to act.

- Design the structural framework of a state plan to achieve measurable goals; demand interagency cooperation and coordination and reallocate resources; and send a clear and articulate message to the public that the state will, with the involvement and contribution of the public, achieve a better, more productive, and more positive life for all of its citizens.

- Demand that all relevant state agencies cooperate to achieve the goals. Reward agency collaboration.

- Reward community cooperation. Encourage intracommunity coordination through the use of competitive grants and challenge grants that tie awards to the extent of involvement by public and private community groups in the planning, application, and implementation of communitywide self-sufficiency and prevention campaigns.

- Involve the public. Use public service campaigns on radio and television built around themes like community job development or full immunization for children. Distribute posters, flyers, and other literature. Use speaking engagements to raise the level of public awareness and involvement in both intervention for adults and prevention for children.

- Organize and help fund local and regional conferences to encourage local communities to adopt and implement their own action agendas based on the priorities in the state plan.

- Begin a systematic reallocation of flexible resources to achieve measurable goals.

# STATE INITIATIVES

States have taken the lead in developing comprehensive welfare prevention initiatives for parents and their children. Forty-three states have implemented new initiatives to move people from welfare to work within the last five years.

All states are implementing new federal child support enforcement techniques mandated by Congress in 1984, and some states have taken the lead with particularly innovative child support enforcement techniques.

Finally, for parents with young children, states have implemented prenatal, perinatal, and parent initiatives. This report includes a summary of some state initiatives.

## *WISCONSIN*

[illegible]

## *MISSISSIPPI*

[illegible]

[illegible]

[illegible]

[illegible]

# WORKS CONSULTED

Children's Defense Fund. 1986. "Welfare and Teenage Pregnancy: What Do We Know, What Do We Do?" Washington, D.C.: Children's Defense Fund.

Children's Defense Fund. 1987. *A Children's Defense Budget: FY 1988, An Analysis of Our Nation's Investment in Children.* Washington, D.C.: Children's Defense Fund.

Cloward, Richard A., and Piven, Frances F. 1972. *Regulating the Poor: The Function of Public Relief.* New York: Random House.

Comprehensive Adult Student Assessment System (CASAS). 1987. "GAIN: Field Test Report." San Diego, Calif.: San Diego Community College District Foundation.

Moore, Kristin A., and Wertheimer, Richard. 1984. "Teenage Childbearing and Welfare: Prevention and Ameliorative Strategies." *Family Planning Perspectives.* Vol. 16, No. 6: 285–289.

Moynihan, D.P. 1987. Beyond Welfare: A Statement Before the Subcommittee on Social Security and Family Policy, Finance Committee, U.S. Senate.

U.S. Congress. House Committee on Ways and Means. *1987 Background Material and Data on Programs Within the Jurisdiction of the Committee on Ways and Means: 1987 Edition.* WMCP: 100-4. Washington, D.C.: 100th Congress, First Session. March 6, 1987.

U.S. Department of Health and Human Services. 1983. *Characteristics and Financial Circumstances of AFDC Recipients.* Washington, D.C.

# TASK FORCE ON
# SCHOOL DROPOUTS

# TASK FORCE ON SCHOOL DROPOUTS

## *CHAIRMAN*

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Our nation's century-old experiment in free mass education has been notably successful. More students graduate from public high school now than at any previous time in history; 50 percent of graduates eventually go on to some form of postsecondary education; quality education is provided in racially integrated settings and females have the same educational opportunities as males; and educational services are provided for disabled students and those who have limited proficiency in English. In spite of the apparent success of this unique commitment to public education, more needs to be done (Hornbeck 1987, 1).

Throughout this century, the educational system in the United States has graduated increasing numbers of students from high school. In 1900, only 6 percent of seventeen-year-olds were high school graduates, but by 1960, 64.9 percent were graduates (Lyke 1986, 3). Most striking are the statistics for school completion among black youth. In 1950, the high school graduation rate for black youth was 25 percent, compared to 56 percent for white youth, while in 1978, 75 percent of black youth and 85 percent of whites were graduating (Hodgkinson 1985, 11).

***Dropout Estimates Vary.*** Estimates of the current national high school dropout rate vary, primarily because no single definition is used to measure dropouts. Variance in reporting, such as defining and computing enrollment, and uncontrollable community differences, such as transiency and mobility rates, cause disparities among even the most widely quoted figures. The accepted range for the national dropout rate is between 14 and 25 percent. The current dropout rate for Hispanic youth is estimated to be 40 percent, compared to 24 percent for black students, and 14 percent for white students (Hodgkinson 1985, 13).

These differences in dropout rates reflect the continuing gap in achievement between minority and non-minority students. On the National Assessment of Educational Progress' reading, writing, and mathematics tests, minorities scored thirty points below non-minorities. The average black seventeen-year-old reads at the same level as a white thirteen-year-old. On average, minorities' scores on standardized achievement tests are about 70 percent of whites' scores (Berlin and Sum 1987, 19). In 1983, only 32 of 700 black high school graduates in a Northeastern city were recognized as "Black Scholars" for achieving a "B" average or better (Dwyer 1987).

Can the United States be satisfied with an achievement gap between white and ethnic minority students, especially when minority students make up nearly 40 percent of all public school students, and their numbers are increasing, placing a greater percentage of public school students at risk of dropping out? The answer is no from a labor market perspective. For example, even as the proportion of the civilian labor force that graduates from high school has grown, labor market demands on the workforce have increased.

## What is a Diploma Worth?

While focusing on the need to graduate more youth from high school, it is also important to ensure the practical worth of their diplomas. The Committee for Economic Development has sounded this warning: "Employers in both large and small businesses decry the lack of preparation for work among the nation's high school graduates. Too many students lack reading, writing, and mathematical skills, positive attitudes towards work, and appropriate behavior on the job. Nor have they learned how to learn, how to solve problems, make decisions, or set priorities. Many high school graduates are virtually unemployable, even at today's minimum wage" (Hurwitz 1987).

Differences in the education systems between the United States and Japan are reflected in the dramatic contrast in the amount companies in each country spend initially to train workers. Toyota in Japan spends 47 cents per worker, while Motorola in the United States spends $200 (Education Daily 1987). Poorly prepared entry-level workers represent an unacceptable drag on the economic vitality of industry.

Companies in the United States prefer to do their own job-specific training, but unlike companies in Japan, they find they also have to teach basic educational skills. According to William Wiggenhorn, a Motorola executive, his company needs workers with English, mathematics, problem-solving, computer, and teamwork skills. Another new American company expects to spend one-third of its $70 million initial training budget on basic skills instruction (Education Daily 1987).

Dropping out of school, while not a certain indicator of future social dependency, is clearly one of the stronger predictors. Over the next decade, it is estimated that dropouts will be 60 percent less likely than graduates to be employed. According to the Bureau of Labor Statistics, in October 1985 one in four dropouts between the ages of sixteen and twenty-four were unemployed, compared with about one in ten high school graduates who were not enrolled in college. When they are employed, dropouts earn about one-third less and are in lower level jobs (U.S. General Accounting Office 1986, 22).

There is evidence that the labor market is rewarding those with high school diplomas more than ever before. For eighteen- to twenty-four-year-old males, the gap in income between a high school graduate and a dropout was 31 percent in the early 1960s. By the first half of the 1980s, the gap had nearly doubled to 59 percent (Berlin and Sum 1987, 10). One estimate of the difference in lifetime earning capacity for a male high school graduate compared to a male dropout is $266,000, while the difference for females is $199,000 (Hahn and Danzberger 1987, 6).

***The Costs and Consequences.*** The consequences of dropping out are more severe today both for the individual and society than at any time in the past. In the only comprehensive study done to date on this facet of the dropout problem, Henry Levin identified seven social consequences of inadequate education, which he defined as the failure to complete high school:

- forgone national income;
- forgone tax revenues for the support of government services;
- increased demand for social services;
- increased crime;
- reduced political participation;
- reduced intergenerational mobility; and
- poorer levels of health.

Based on data available at that time, Levin estimated the social costs of providing social services and fighting crime associated with dropping out at $6 billion per year (Levin 1972, 10). Today, of course, the figure would be much higher.

Additionally, the United States is moving toward a period of labor shortages. The proportion of young people is declining, and the massive number of adults born during the post-war baby boom is headed for retirement. By 1995, fourteen- to twenty-four-year-olds, who traditionally fill entry-level jobs, will make up only 16 percent of the population. Pierce Quinlan of the National Alliance of Business believes that business and industry will have to compete with the military to fill entry-level jobs, since it is projected that the military will need one out of every three labor market entrants by 1992.

> ***"We have to start talking about things that make a difference, and one thing we know makes a difference is a job. This is an area in which the business community and the public sector can get together and put these kids into jobs. Jobs make a difference. Poor kids need money. That's just one obvious thing. But they also want money even if it isn't totally to support themselves. In other cases, it's because they want the things they are told they ought to want . . . they sit and look at television and you got to have the right kind of sneakers or the right kind of symbol on your jeans."***
>
> **SIOBHAN OPPENHEIMER-NICOLAI**
> Hispanic Policy Development Project

However, Quinlan has also sounded a note of optimism: "While the problems are complex, they are solvable. Net job creation in the next ten years is expected to exceed (by over one million jobs) the number of new entrants into the labor force. There is a strong likelihood that there will be a job for every person who wants one and who has or can obtain the basic skills required" (Quinlan 1987). Combating the school dropout problem is a critical step toward providing the skilled workforce to fill those jobs.

Dropping out of school is not an isolated phenomenon. It is part of a complex, multifaceted problem that is one of several predictable outcomes for a segment of youth who are typically poor, low achievers, and socially alienated.

## Who is at Risk?

***Poverty Places Children at Risk.*** Fourteen million children in the United States live in poverty—almost half of black children, one-third of Hispanic children, and one-fourth of all children (Education Commission of the States 1985, 17). Analysis of the High School and Beyond data indicates that poor children drop out at more than three times the rate of more-advantaged children (Barro 1984). Dropouts frequently come from large poor families where a parent or older sibling has also dropped out.

***More Minority Youth Are at Risk.*** As many as 40 percent of Hispanic students, 24 percent of black students, and 48 percent of native American students drop out before completing high school, compared to 13 percent of white students (Hahn and Danzberger 1987, 3).

National longitudinal data suggests that race does not predict dropping out when family background is taken into account (Wehlage and Rutter 1986). This is supported by recent research by the Colorado Department of Education, which showed that compared to the parents of academically marginal Hispanic students, the parents of high-achieving Hispanic students read more frequently to their children, had fluency in both English and Spanish, and modeled a clear commitment to literacy.

When comparisons are made among students whose families share a common socioeconomic status, the differences in achievement and school completion rates among white, black, and Hispanic students are insignificant (Wehlage and Rutter 1986). However, the fact that a disproportionate number of minority children live in poor families means that a larger number are at risk.

The achievement gap between white and minority students contributes to the income gap between their families. A critical factor in closing that achievement gap is to ensure that minorities who achieve academically can realistically expect end rewards for achievement. Even when black youth complete school, only 32 percent obtain employment—not much of a gain over the 29 percent of black school dropouts who obtain employment (GAO 1986, 24).

***Where One Lives Can Increase Risk.*** In poor inner-city and rural communities, fewer students complete school. In New York City, only 56 percent of ninth graders graduate, in Chicago 43.5 percent, and in Detroit 33.5 percent. The Central Appalachian region of the United States, heavily populated by the rural poor, has a school dropout rate of 38 percent. In Southern Appalachia the rate is 30 percent (Campbell Communications 1987). Native American students who attend schools in areas with non-Indian students have a higher completion rate than those who attend exclusively Indian schools (Salazar 1987).

Low-income urban black students often see little value in academic achievement. Dr. Floretta McKenzie, superintendent for the Washington, D.C., public schools, describes this dilemma: "As we seek to improve achievement of urban blacks . . . we're going to have to deal with the value structure, with youngsters who don't see the reward for achieving." In fact, a recent study of the attitudes of low-income black students in the nation's capital found that many of them deliberately limit their academic success because of peer pressure not to achieve. The study traces this peer pressure to the inferior schools and low-level jobs that predominate in the black community (The Washington Post 1987).

***Social Problems and Alienation Increase Risk.*** Young people who are experiencing school problems such as chronic truancy, disruptive behavior, and suspensions are among those at risk. Youth who become teenage parents without the education or skills to support a family also are at risk. Forty percent of girls who drop out are pregnant or are getting married (Earle 1987, 9). According to the *High School and Beyond* data, one in four teenage girls who drops out of school does so because of pregnancy.

In addition, growing numbers of young people have personal or family problems associated with drug or alcohol abuse. The National Center for Health Statistics reports that arrests among teenagers for drug abuse increased 600 percent between 1960 and 1980. Arrests for drunkenness among high school seniors rose by 300 percent during that same period (ECS 1985, 13). Seniors who are heavy drug users are more than six times more likely to be truant from school (U.S. Department of Education 1985, 10).

Finally, youth who have come to the attention of the criminal justice system are at greater risk of school failure. Young people under age twenty-one account for more than half of all arrests for serious crimes. In 1960, eighteen- to twenty-year-olds accounted for only 18 percent of all arrests; by 1980, they accounted for 34 percent (ECS 1985, 13).

***Inadequate Basic Skills Increase Risk.*** A lack of adequate basic skills—the ability to read, write, compute, and communicate—is the one characteristic that the school dropout, the teenage parent, the criminally involved, and the socially dependent youth typically have in common. A lack of these skills, combined with either poverty status or minority group membership, is an even stronger predictor of failure.

Those who are behind their age group in grade level are at risk. Being retained one grade increases the risk of later dropping out by 40 to 50 percent; being retained two grades increases the risk by 90 percent.

Finally, females with poor basic educational skills are five times as likely to become mothers before age sixteen as those with average skills (Earle 1987, 9).

### TEXAS

**The Communities in Schools (CIS) program is one of two exemplary state programs operated in collaboration with public or private service agencies to provide comprehensive education and social services to at-risk youth. The CIS program is an affiliate of the national Cities In Schools model, which brings an array of human service agencies into the school to ensure a whole-child approach to service delivery.**

**The Youth Opportunities Unlimited (YOU) program is the second initiative that operates through interagency coordination. It is a university-based summer education and work experience program, combined with a range of support services, to provide an eight-week, total-immersion experience for disadvantaged fourteen- to fifteen-year-olds who are entering the ninth and tenth grades. Twelve campuses hosted approximately 1,200 youth during the summer of 1986. The program is a collaborative effort of the Texas Educational Agency, Department of Community Affairs, Job Training Partnership Act, and Service Delivery Area operators.**

# ELEMENTS OF A STRATEGY

> *"Now we have to adopt an investment strategy for kids—we have to invest more money into education. We are only spending 1 percent of our welfare dollars trying to put people to work and educate and train them. It is not enough. We are never going to break out of the cycle we are in until we are willing to invest in the future."*
>
> BILL CLINTON
> Governor of Arkansas

Not surprisingly, the solutions to the various social problems of at-risk youth are interrelated. High dropout rates contribute substantially to the adult illiteracy problem. Teenage pregnancy accounts for a significant percentage of school dropouts. Dropouts are almost twice as likely to be frequent drug users as are high school graduates (U.S. Department of Education 1985). The correlation between high school completion and the ability to support a family is clear. In 1982–83, 39 percent of all children in two-parent families in which neither parent had completed high school lived in poverty. Twenty percent of children in families in which one parent had graduated were poor. When both parents had graduated, only 7 percent were poor (Lyke 1986, 7).

Because of these interrelationships, successful intervention strategies are likely to be those that are comprehensive. The multiple barriers to achievement for at-risk youth cannot be removed with simplistic solutions. No one agent of government, no single organization or industry can orchestrate a solution to the school dropout problem or the broader basic skills problem. The problems reach beyond education and it is unwise and unfair to expect the schools to solve them alone.

The family, the church, the schools, employers, public agencies, and neighborhood organizations all must be partners in a collaborative effort to reconnect alienated and disadvantaged youth at risk of failure.

*Time for Results: The Governors' 1991 Report on Education,* published by the National Governors' Association in 1986, provides the framework for state dropout prevention strategies. The project's Task Force on Readiness emphasized two critical building blocks:

- Early childhood development programs for those at risk are needed, and parental involvement should be emphasized.

- New initiatives to ensure that at-risk children and youth meet the new educational standards are needed, including creating incentives and improving the training for education professionals; reducing class size and/or the student-adult ratio in the lower grades; and providing alternative education programs for dropouts.

In addition to *Time for Results,* some thirty-five national groups and 300 state commissions have been formed to address the problem since 1983. The product of this attention is a wealth of information, from which the elements of a strategy emerge:

- Parent involvement in planning and service delivery.

- Preschool education activities for very young children as an effective prevention measure.

- Choice among program options and schools by students and parents to ensure appropriate learning environments.

- Efficient use of student information to monitor student progress and target services to the most needy.

- Instructional techniques and incentives to increase motivation and achievement among at-risk youth.

- Second chance programs for school dropouts to complete their education.

- Professional development to train all school staff in the methods that will increase student retention.

- A cohesive program of education, social, health, and career services provided through interagency and school-business collaboration.

## Students and Parents

The needs of children at risk are basically no different from those of high-achieving, middle-class students. Before formal schooling begins, they need care and guidance from parents, health and nutrition services, and preschool development activities. As they enter and progress through school, they need parents who are aware of and participating in decisions about their education. They need opportunities to be involved with people who understand and care about them, and who can be mentors and counselors; year-round learning and work opportunities and career guidance; nutrition and health services; positive recreational activities; and family life and sex education. Finally, they need career opportunities after they complete school. The strongest incentive for staying in school is having these needs met.

### *SOUTH CAROLINA*

**An innovative basic skills remediation program seeks to reach over 12,000 students who are at risk of school failure, at a time when the state education community is raising standards as part of education reform. The Governor's Remediation Initiative works to upgrade the reading and mathematical skills of chronically failing students. A computer-based instructional management system links diagnostic tests and learning prescriptions to teaching modules. Low-achieving students can work at their own pace at computer terminals with individualized remediation programs.**

**The project is a collaborative effort of the state education and labor agencies, local schools, and corporate businesses. The state education agency provides grants to establish computerized labs and train teachers. Schools with at least 50 percent of [illegible] below standard on basic tests are eligible for grants. The program has [illegible] million [illegible] of state Job Training Partnership Act funds. The school provides teachers' salaries and [illegible] and shares the cost of the computers with the state. Digital Equipment Corporation donates the software management system, and the teachers are involved in designing the software.**

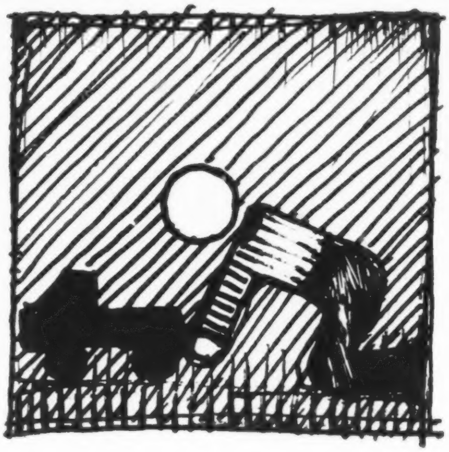
**In the first 2 years, 166 labs were operating and teachers were involved in [illegible] training and software development activities. The program had served 12,575 students and their gains on standardized tests were impressive—[illegible] times the expected gain. The curriculum is related to the state's basic skills test objectives and the initiative is thought to be a key factor in preventing low-achieving students from dropping further behind despite higher standards.**

**In addition, the newly established National Dropout Prevention Center at Clemson University will be an information and technical assistance resource for school districts throughout the country.**

## Preschool Education for Early Dropout Prevention

Longitudinal studies have indicated that quality preschool programs for at-risk children reduce the high school dropout rate, increase the likelihood of employment, and reduce welfare and crime rates after high school. They are also cost-effective in the long run, saving $4.50 for each $1 spent (Weikart 1985). At the preschool level the focus should be on family stabilization, early childhood development, and early identification of preschool children whose families are experiencing poverty and/or other debilitating social problems that place them at risk. Parents should be involved with efforts to provide effective preschool developmental experiences for three- and four-year-olds and kindergarten for all five-year-olds.

Research also supports the assumption that parents of preschoolers benefit from training in parenting, and from reading and talking to their children. The impact on their children is broad and produces increased performance in both affective and cognitive skills (National Governors' Association 1986).



Even though educators are aware of the importance of parent involvement to a student's academic and social success at school, it is often difficult to engage the parents of the most needy school children. Poor and minority parents cope with the demands of family life with limited resources. They are often intimidated and discouraged by their lack of sophistication concerning school, and often by their own experiences as students.

Parents should be encouraged to engage in school activities and to communicate with teachers and administrators. They and their children will benefit. Some ways to reach out to parents of at-risk youth are to:

- Provide training to core groups of parents for parent-to-parent outreach in the school community.

- Provide positive reinforcement and community recognition for any parent participation.

- Have teachers and/or counselors make home visits to meet with and involve parents who are not responsive.

- Co-sponsor activities with community organizations in which parents may be involved.

## Professional Development

Dropout prevention programs will not be effective unless the staff is sensitive to and skilled in proven techniques for meeting the needs of at-risk students. Communities with a high concentration of at-risk students typically face two staff problems: a shortage of teachers who share a common ethnic or cultural background with the students, and the placement of the least experienced teachers in schools where the students are furthest behind academically and the most difficult to teach.

Professional development programs for teachers, administrators, counselors, and other professionals should be a key element of the dropout prevention initiative. Training should focus on the needs of at-risk youth. This has broad implications for state teacher education and certification policies, pre-service and in-service training; teaching assignments; and teacher incentives for both performance and nature of assignment.

Pre-service and in-service training should provide the information and training needed to assist at-risk youngsters. The training should include the use of specialized curriculum materials; appropriate instructional techniques; parent involvement training; application of the practices recommended in research on effective schools; individual counseling skills, and awareness of cultural differences. State education agencies can assume responsibility for design of training and for preparing the trainers who would work directly with local district staff development programs.

State teacher education programs should prepare students to teach, counsel, and work in school administration in communities with a large at-risk population. They should also teach prospective teachers how to involve parents.

## Incentives for Attracting Teachers

States should focus on providing incentives to attract talented teachers and effective managers to schools that serve at-risk youngsters. Incentives can encourage experienced and skilled teachers to take on the added responsibility of working with at-risk students and to remain in those positions as specialists. The incentives might include salary supplements, training or education opportunities, promotions, or special recognition for performance. Those who have expertise in motivating at-risk students can be designated as master teachers or mentors for less experienced teachers. Compensating master teachers accordingly would be an incentive both for retaining them and attracting additional teachers.

## Recruiting Minority Professionals

State education agencies may need to help local school districts recruit more minority teachers and other school professionals who can provide positive role models and serve as mentors for minority youth who are at risk. Increasing the minority staff can help the school staff understand the culture and lifestyle of these students.

Some techniques that have been used to recruit minority teachers are to:

- Forgive all or part of college loans of minority teachers. State college education loans could be forgiven in exchange for teaching a specified number of years in a particular district.
- Establish teacher cadet programs to attract minority high school students to the teaching profession. Invite promising minority high school students to visit a college campus during vacations for an orientation to teaching. Provide follow-up information and career guidance. Also, talented minority students can be offered a chance to participate in teacher cadet programs at the high school level. These provide an orientation to the teaching profession and give students an opportunity to participate in classroom teaching at their own or other high schools.
- Provide assistance to school districts from private industry recruitment experts who have sophisticated techniques for minority professional recruitment.

### *School–Business Alliance*

***New York State's School and Business Alliance unites employers and organized labor with students, educators, community organizations, and government to raise scholastic achievement, reduce the dropout problem, and secure gainful employment for high school students. Its fundamental objective is to improve high school graduation rates and the employability skills of the youth labor force.***

***It builds on previous dropout prevention efforts by consolidating and targeting initiatives in the areas of youth employment competencies, job training, and subsidized work experience. It leverages existing resources available through established state, local and federal programs. Ten school districts are participating in the first year of the program.***

### *NEW YORK*

**In 1984, the New York State Legislature adopted the Attendance Improvement/Dropout Prevention (AI/DP) program, which requires school districts at or below the tenth percentile in attendance to submit a corrective plan. The plans must include methods of identifying at-risk students in the eighth grade and specific actions to increase attendance and retention rates.**

**For the 1984–85 school year, the legislature appropriated $28 million in grants for New York City's community school districts and sixty-eight upstate districts. The program funds were used most frequently to increase counseling for students, referrals to outside agencies, and parent contact.**

**For 1985–86, the law and regulations for the AI/DP program were changed to require school districts to target funds to schools with a truancy rate above the median for the district and to provide services to middle school students. New York City received grant funds to serve 27,450 students, and upstate districts received grant funds to serve 79,000 students. As in the previous year, counseling was the service most frequently provided to students.**

**WISCONSIN**

**The Wisconsin Children at-risk program provides a comprehensive approach to the school dropout problem. The 1985 act creating the program defines children at risk and requires every school board to [illegible] to develop a plan to [illegible] identify [illegible] through [illegible] supported by [illegible] community [illegible] and other successful approaches.**

**School districts that had fifty or more dropouts or a high school dropout rate exceeding 5 percent in the previous school year must have their plans approved by the state superintendent of education. They must then submit an annual report detailing the [illegible], retention, and high school graduation rates for pupils enrolled in the Children At-Risk Program and the proportion of those pupils who received academic credit during the school year.**

**Districts that must have their plans approved may receive additional state aid if three of the following conditions were met:**

- **The average attendance rate of pupils in the program was at least 70 percent.**
- **The retention rate for pupils enrolled in the program was at least 70 percent.**
- **At least 70 percent of the pupils enrolled in the at-risk program as high school seniors received a diploma.**
- **At least 70 percent of the pupils enrolled in the program earned credits sufficient to advance to the next grade level.**
- **Pupils in the children at-risk program can show, as a group, at least one month of improvement in reading and mathematics performance for each month of instruction.**

**The Department of Public Instruction has developed a comprehensive resource and planning guide for school district staff. Department staff also conduct numerous conferences and workshops to help school districts implement the initiative.**

## Improving Working Conditions

Among its recommendations, *A Nation Prepared: Teachers for the 21st Century*, the Carnegie Forum's 1986 report on teaching as a profession, calls for sweeping changes in education policy to:

- Restructure schools to provide a professional environment for teaching, freeing teachers to decide how best to meet state and local goals for children while holding them accountable for student progress.
- Relate incentives for teachers to schoolwide student performance, and provide schools with the technology, services, and staff essential to teacher productivity.

These reform recommendations, along with those in *Time for Results*, offer ways to improve working conditions for teachers and to increase the accountability of education professionals. These include reducing class size and/or student-teacher ratios, particularly in kindergarten and the elementary grades; restructuring schedules and reducing the amount of non-instructional duties to give teachers time to work with individual students and parents; and encouraging greater flexibility in organizational structures, curriculum, and teaching methods. These measures can help to increase student retention.

## Improving the School Environment

David Hornbeck, Maryland school superintendent, summarizes the situation: "As we have carried forth our grand experiment in universal free public education, we have largely fashioned a system that serves well those who are white, middle- to upper-income, well-motivated, and from relatively stable families. As students have deviated more and more from that norm, the system has served them less and less well. The critical mass of at-risk chil-

## *STEP*

***Public/Private Ventures, a national non-profit corporation that designs, manages, and evaluates policy initiatives, has developed a model Summer Training and Education Program (STEP) for at-risk youth, which is being demonstrated in five cities. The STEP model aims to increase basic skills and to decrease dropout and teenage pregnancy rates by providing remediation, life skills training, and work experience over two summers, with interim school-year support. The summer 1986 STEP participants gained 6 points in math scores, while control group youth dropped 18 points.***

dren and youth has grown so large that it now threatens the entire system. Instead of blaming the students for not fitting the system, we must restructure the system to provide appropriate educational services to those at greatest risk" (Hornbeck 1987).

Students frequently drop out of school because of institutional factors, such as promotion policies that push students out because they lose self-esteem when they are behind in grade level; boredom with the monotony of the school structure; curriculums that do not relate to the students' lives; lack of individual attention to students; and inflexible school schedules that do not accommodate the demands on students who work or have children.

The state should provide the leadership for developing alternatives to traditional school structures and programs that will be more likely to encourage at-risk youth to complete school. Schools need to stretch beyond their normal structural and procedural constraints to attract, motivate, and retain students.

James Weber of the National Center For Research in Vocational Education examined nine exemplary dropout prevention programs in urban, suburban, and rural districts in diverse regions, that had a variety of high-risk students and used diverse program strategies. Weber identified the following common features:

■ The program context usually differs from a traditional school environment, having either a separate facility or a "school within a school." They tend to have parental involvement, to have low student-teacher ratios, to function somewhat autonomously, and to focus on students between the ages of fourteen and sixteen.

■ Staff are committed to the philosophy and goals of the program, are able to establish productive working relationships with their students, and are flexible both in their approach to instruction and to student supervision.

■ Half the instructional effort addresses students' educational and remediation needs; one-fourth addresses personal needs such as improving self-image and self-worth; and the remaining fourth is aimed at work-related needs.

■ Motivational strategies include tying school activities to the workplace and to daily living; building more individualized teacher-student linkages; encouraging mentors; offering special recognition and awards; and providing activities aimed at building group spirit among students.

The following policies, instructional techniques, and incentives can increase school achievement for at-risk youth, and thereby reduce their chances of dropping out.

■ Create year-round learning and work opportunities for at-risk students to reduce the summer learning loss, including remedial basic skills instruction, work experience, and summer courses.

■ Consider individualized competency-based promotion policies that do not lower standards for at-risk youth.

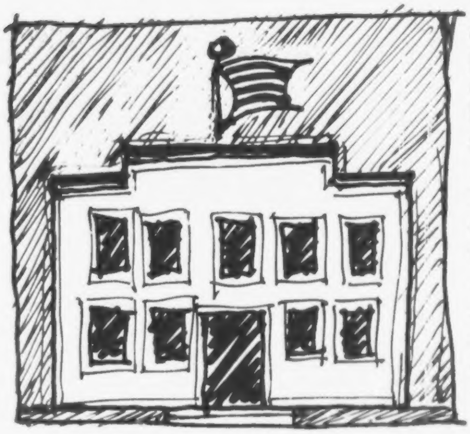
■ Establish policies that encourage teenage parents to continue their education during pregnancy and to complete high school. These might include in-school education programs that provide an academic program, parenting education, health and nutrition services, and counseling during pregnancy; and assistance with child care, either in the community or in the school, after the child is born.

■ Use volunteers to help students develop basic literacy skills at school. Volunteers could include other students. At-risk students benefit from the positive experience of helping a student with less developed skills.

## Early Warning and Response

States should help school districts develop systems to alert counselors to the earliest signs of negative behavior, academic deficiency, or family or social problems. Typical early warning signs that warrant attention are:

- lack of basic skills and/or being behind in grade level;
- chronic truancy;
- limited proficiency with the English language;
- disruptive school behavior;
- family trauma;
- economic disadvantage;
- being a school-age parent;
- school suspensions;
- personal or family drug or alcohol abuse; and
- social alienation.



The school district can take several actions when it becomes aware of an at-risk student. First, the student's ability, achievement, and specific problems can be assessed. Second, the student's parents or guardian should be notified and involved in developing an action plan to improve the student's school success. The parents should have a role in monitoring its progress. Third, information about the student and his or her action plan could be shared with community agencies that might cooperate with the school to provide services to the student. This early warning and response system should continue to monitor and intervene as the student progresses through the system.

The actual process of dropping out is one of the least complex public school procedures. In fact, it is much easier to drop out of school than to re-enter. In most districts, a young person can leave school without the involvement of his parents or counselor as long as he is sixteen or older. Some states are considering raising the legal dropout age to above sixteen. This strategy may eliminate dropping out as an option for some of those at risk, but it should be accompanied by prevention programs aimed at removing the causes of dropping out. Also, greater effort should be made to enforce the mandatory school age policies already in place.

At a minimum, state and local guidelines should ensure that during the school exit process, dropouts receive information and guidance to plan for employment, training, or continued education, and that their parents are involved and are aware of their rights with regard to re-entering school. A more intensive intervention strategy would be to encourage dropouts to return to school through workshops for parents and dropouts.

## Improving Data Collection and Reporting

Another priority for states is to develop a usable system that collects enrollment data, including standard definitions for dropouts and graduates. Enrollment data needs to be compiled and maintained in a systematic way to ensure its usefulness in monitoring student programs.

The definition of a school dropout varies from state to state. Who is counted and when the count is taken varies, which makes it difficult to develop accurate national statistics about dropouts. The Task Force on Collecting National Statistics on Dropouts, a component of the Council of Chief State School Officers' State Education Assessment Center, has developed recommendations to improve dropout statistics. They recommend the following definition of a dropout: "A pupil who leaves a school for any reason except death before completion and without transferring to another school."

## Targeting Middle Schools

When a student reaches middle school, negative behavior, truancy, and achievement deficiencies that typically precede dropping out may accelerate. As many as 25 percent of eighth graders in some large urban districts never make it to ninth grade, and are absent for much of the eighth grade. Chronic truancy at some urban middle schools is out of control, with as many as 25 percent of the students absent on any given day and with one truant officer for every 2,500 students in the larger cities. (Hahn and Danzberger 1987)

A typical inner-city middle school with a predominantly black and Hispanic population promotes 500 eighth graders to the high school for which it is the sole feeder school, but only 250 students graduate from that high school each year. Students who make the transition from middle to high school in that district still have only a 50 percent chance of graduating.

In middle school, the close monitoring of student progress that was possible in elementary school may be lost—perhaps when it is needed most. These students still need individual attention, which can be provided through supportive relationships with teachers as well as adults in the community, such as mentors, counselors, tutors, or employers.

## Student Choice Among Programs

Schools must respond to a youth's distinct and individual needs. Students and their families should be able to exercise choice in both education program structure and setting. Program options could include programs based in school or the community, both within and among school districts. Until a student has reached the eligibility age limit, he or she should be entitled to use both local and state public education funds for kindergarten through twelfth grade services, as long as the schools meet the state education standards. This policy allows the at-risk student to leave a school or setting in which he has had a negative experience.

*Time for Results* provides supportive evidence for including student and parent choice as a key element of student retention strategies. The project's Task Force on Parent Involvement and Choice explored the issue of expanded educational choice for families and its implications for student achievement and equality of educational opportunity.

### ARKANSAS

As part of a comprehensive education reform effort, Arkansas developed minimum performance tests that have been administered since 1982. Scores have increased significantly over the years. Now state policymakers are focusing on services to students who are at risk of not completing their education and who are unprepared for the world of work.

Any student who does not pass the minimum performance test is given an academic skills development plan. The plan can include an extended school day or year, or an alternate curriculum. The district is required to meet with the student's parents to help formulate the development plan. Beginning with the 1987–88 school year, eighth grade students must pass the minimum performance test to be promoted to the ninth grade.

In addition, stringent guidelines have been developed to report data on students who leave school before graduation. This data helps the Department of Education track students more efficiently, and it helps determine the progress of school standards.

With the support of a foundation grant, Arkansas Advocates for Children and Families, a private advocacy group, is working with the Department of Education, the Vocational Education Division, the Employment Security Division, the Department of Human Services, and the private sector to develop a statewide school-to-work transition system targeted to at-risk youth. The project, Services Provided for At-Risk Kids (SPARK) has already established a Governor's Task Force on Youth At Risk and instituted a training program for school counselors that focuses on disadvantaged youth, dropout prevention, and school-to-work transition. The next step will be to organize regional Education for Employment task forces to increase participation by the business community in school-to-work transition programs.

> ***"At the age of nine, my mother took me out of school, which meant she no longer sent me to school. I became, in a sense, a mother figure for my (six) brothers. I started cooking, cleaning, and taking care of them. Now that I think back on it, my question is how come no one ever knocked on my mother's door and asked 'How come your child is not going to school.' But I guess it wasn't important.***
>
> MARIA GARCIA
> New York

## Preparation for Work

The motivation to succeed in school is enhanced when young people can set goals for themselves and when school helps them achieve those goals. These successes prepare the student for work later in life. Dropout prevention programs must link schooling to the realities of work and provide the skills needed for employment, advanced training, or college. Vocational education traditionally has been a useful alternative environment for potential dropouts. Vocational education, school-based enterprises, and work-study opportunities with local employers are ways vocational training occurs in schools today. These programs should combine vocational and academic curriculums, and offer strong career guidance and counseling components. The application of basic skills through vocational education is one approach to prevent and alleviate the boredom that secondary students often cite as a reason for wanting to leave school. They benefit from the stimulation and motivation that are characteristics of experiential learning.

## Second Chance Programs

Dropping out is often only a temporary condition. The *High School and Beyond* data showed that half of school dropouts had either returned to school or were enrolled in General Educational Development (GED) preparation programs after four years. An examination of the educational attainment of twenty-eight-year-olds found few who did not have either a high school diploma or GED certificate or some other form of education or training. Another recent study indicated that 38 percent of dropouts had returned and completed a GED after two years (Earle 1987).

The higher their scores on ability tests, the more likely dropouts are to return to school. The older dropouts are when they leave school, the more likely they are to return. Among white dropouts, young men and women are equally likely to return to school, but among black and Hispanic dropouts, males are about 10 percent more likely to return to school than females (Kolstad and Owings 1986). In urban areas, young males are 18 percent more likely to return to school than females. These statistics place young minority women in urban areas at greater risk of never completing school once they drop out (Earle 1987).

These data clearly indicate the need for second chance programs for dropouts. Although dropouts tend not to return to the regular high school environment, they do come back to public and private education agencies for additional education and training. It is important that public policies provide dropouts, particularly girls, with easy access to school re-entry or second chance education programs, such as GED classes, community alternative programs, or employment training.

***Helping Dropouts.*** What services are needed by those who have already dropped out of school? First, they need to be identified and made aware that services are available. Public schools rarely reach out to dropouts. Community response teams might be a valuable resource for identifying and contacting young people who recently dropped out.

Second, dropouts often need a combination of work and continued learning. Adult basic education programs offer flexibility to a person who works, or has a child, making this a viable option for the dropout who wants to continue in public school. Second chance programs outside the public schools are also needed for dropouts who will not return to school. These programs should combine education, either GED preparation or basic skill upgrading; job readiness and skill training; and the opportunity to work.

***Alternative Settings.*** Many potential and actual dropouts are able to continue or return to school if an alternative to the traditional school setting is available. Alternative schools are scarce, but often have considerable success. A synthesis of fifty studies conducted around the nation concluded, "For all types of students, from the neediest to the most outstanding, alternatives seem to produce significant growth and achievement: cognitive, social, and affective" (Raywid 1984). Another national study found that "Attendance rates at alternative schools almost without exception exceed those in regular schools. Where standard measures of achievement, such as test scores and college admissions are applicable, they show alternative school students perform at least as well as their counterparts in traditional school programs, and usually better" (Jansen 1974).

While many alternative schools help previously unsuccessful students reach their potential, they will not, by themselves, eliminate the dropout problem. Two studies of alternative programs working with the most alienated, angry students in New York City found that only half of the students they enrolled graduated. However, alternative programs often are the best solution for young people who want to continue school but who need a learning atmosphere where they can develop close supportive relationships with teachers. School systems need to offer more alternative schools and, generally, those in existence need to strengthen their academic components to match the effectiveness of their other characteristics. (Hahn and Danzberger 1987)

Gary Wehlage and his colleagues at the National Center on Effective Secondary Schools have identified these characteristics of model alternative programs for at-risk students:

- Small size (typically twenty-five to one hundred students with two to six faculty), a clear program identity, teacher autonomy, and a strong sense of collegiality.

- Student commitment to clearly stated rules about attendance, behavior, and the quantity and quality of work required; and a clear understanding of the consequences for breaking these rules.

- Experiential learning that gives students an active role in meaningful work and exposes them to adults who exemplify responsibility, the work ethic, and positive human relationships.

***Developing Positive Attitudes.*** A young person's attitudes toward education are critical. One of the most effective ways to improve these attitudes is to establish programs combining classroom work with community service. Diane Hedin found that "adding a well-designed peer or cross-age tutoring component to an elementary or secondary school program has the potential for significantly augmenting the school's capability to promote academic achievement and interpersonal growth" (Hedin 1986, 14). Eliot Wigginton found that low-income rural youth who helped produce an oral history magazine, *Foxfire*, showed major improvement in academic skills and enthusiasm for learning. Educators note that even teenagers prone to violence have shown dramatic academic and social improvement when given the opportunity to help solve consumer problems as part of a course on courts and laws (Nathan 1984).

## MINNESOTA

**Minnesota's 1987 High School Graduation Incentives initiative provides increased opportunity for student and parent choice among education programs, including the option of attending a school outside of a student's designated district. The policy encourages students aged twelve to twenty-one who are having trouble to enroll in alternative programs to complete high school. Student eligibility criteria include being: two grade levels below the performance of age peers; one year behind in obtaining credits for graduation; pregnant or a parent; assessed as chemically dependent; or excessively absent. The legislation provides twenty competitive planning grants to existing alternative programs to become area learning centers.**

**In 1985, Minnesota began allowing high school juniors and seniors to receive high school and college credit for classes they complete in postsecondary institutions. Tuition is paid by the student's school district.**

**The Cass Lake-Bena School district in northern Minnesota is located on the Leech Lake Indian Reservation. The area has a 70 percent unemployment rate, a high incidence of alcoholism, a high crime rate, and a large portion of children from single-parent families. Native American students make up 48 percent of the high school population, and their drop-out rate for the graduating class of 1982–83 was 60 percent.**

**The Indian Education Program was expanded in the Cass Lake-Bena district in an attempt to increase school completion rates for native American students. A comprehensive array of education and support services was developed. The concentration of support services resulted in greater retention of native American students. By the 1985–86 school year, the dropout rate for native American students had been reduced to 28.6 percent. Services include tutoring; counseling; the use of home-school liaison personnel; transportation for medical and dental health care; support for Indian Club activities; career exploration and work experience; inclusion of Ojibwe Indian language and culture studies in the curriculum; a native American resource library; a chemical dependency library; and a variety of recognition and incentive activities.**

## Collaboration

Schools cannot meet the challenge of improving graduation rates for at-risk youth without the support and active involvement of parents and public and private community organizations. At the preschool and elementary levels, schools should work primarily in cooperation with family service organizations, health care agencies, community recreation and cultural groups, and parents to ensure that each young child's educational, social, and health needs are met. The collaboration between schools and other community elements should begin to shift during the middle school years to the business sector, community colleges, law enforcement agencies, and the employment and training sectors. This broader pool of resources reflects the student's need to connect school with adult life functions.

The schools need assistance from local communities to build a network of support and services for at-risk youth. Assistance should focus on the family and be accessible throughout a child's dependent years. There is no single point at which intervention is more important than any other point. Whenever a child's needs are unmet, this network must be activated.

Community-based organizations, the business sector, religious organizations, and public agencies can be organized into community response teams to provide support for school dropout prevention efforts. The response teams would develop a cohesive service plan for each youngster in crisis who is referred by the school. A team member could adopt an at-risk student or a whole school. States might support the teams by providing funding, training, or other resources, but private funding and resources are important.

Serious policy consideration should be given to collaboration among public and private organizations to provide dropout prevention programs that are committed to specific results. One such initiative would be a commitment to provide all high school graduates who meet specified criteria the opportunity for postsecondary education, training, or a job. The collaborating partners would be the state education agency, state colleges, and businesses. The criteria for students to qualify might include: academic performance, such as a specified grade point average or successful completion of a job readiness or training program; school attendance, such as 95 percent senior year attendance; eligibility, such as economic need; or behavior, such as providing a specified number of hours of community service.

### *OREGON*

**Oregon's progress in providing coordinated interagency services for at-risk youth demonstrates the effectiveness of an intermediary organization as a catalyst for developing collaborative programs. Oregon was one of the state sites for Public/Private Ventures' (P/PV) State Initiatives for Youth demonstration. P/PV is a national intermediary organization that conducts policy studies and manages demonstration projects to improve the employability of disadvantaged youth.**

**Oregon's Youth Coordinating Council was created to coordinate services during the P/PV demonstration, which was completed in March 1986. Collaborative local projects were funded through the council. The council continued after the demonstration with Job Training Partnership Act funds from the state Job Training Coordinating Council and vocational education funds from the state Department of Education.**

**Local projects for at-risk youth that were funded through the state Youth Coordinating Council were continued with local support. The council currently funds local programs through a competitive grants process that requires applicants to demonstrate a coordinated approach to services for dropouts and potential dropouts, teenage parents, and juvenile offenders.**

**Additionally, Portland, Oregon, is one of the five sites at which P/PV's Summer Training and Education Program (STEP) is being demonstrated. STEP is an intervention program aimed at reducing the summer learning loss for at-risk youth. The program combines work, remediation, life skills instruction, and school year support. Each of the demonstration sites (Boston, Seattle, Portland, Fresno, and San Diego) has both a treatment and a control group whose progress is being compared to determine program impact. The treatment groups work part time on federally funded jobs and attend classes part time for seven weeks, while the control groups work full time. The Portland program has recruited members of local youth service agencies to make referrals to needed services, and business representatives to help locate part-time job opportunities.**

# AGENDA FOR STATE ACTION

***There is a clear role for intermediary agencies in helping business and community agencies become involved with school dropout prevention initiatives. They are often publicly funded to conduct public policy studies and develop and evaluate demonstration projects, functioning as catalysts for innovative policy initiatives. Cities In Schools is a national intermediary agency that coordinates social, health, and other support services with education within the school. It creates a valuable link between public service needs and private or community resources.***

With hope, commitment, and hard work, young people can achieve more, can realize their own potentials, and can become productive members of society. Young people must be made aware of their responsibilities and the challenges the future holds for them.

Parents need to appreciate the importance of their role in the schooling process of their children, and educators need to promote the active participation of parents. Education systems and processes need to be flexible and respond to meet the multidimensional needs of at-risk youth. Students, parents, educators, and communities need to be challenged to set realistic goals to reduce the rate of dropping out, while simultaneously reducing the achievement gap between the at-risk student and others.

The Agenda for State Action involves four main steps. To develop such an agenda, the Governor should:

- Determine what needs to be done.
- Develop a professional infrastructure.
- Provide incentives that will stimulate efforts to help at-risk youth.
- Provide hope that something can be done and that young people can be motivated to stay in school.

These components will provide the focus for a comprehensive plan built around the Elements of a Strategy discussed earlier in this report.

## 1

## *Determine What Needs to be Done*

- Organize an initiative and establish a task force to guide the planning and implementation. At a minimum, the task force should include representatives of the state education agency; state human service departments; employment and training agencies; the state and local school boards; teacher organizations; administrators; the business community; and community service agencies. It should be appointed by the Governor and work in concert with the State Board of Education.
- Determine who is in need and what state resources are in place to meet those needs. Determine the demographic and achievement characteristics for the student groups with the highest incidence of dropping out.
- Assess the efficiency and utility of the existing system for collecting and compiling student enrollment and attrition data, using the Council of Chief State School Officers' model and definitions.
- Determine the consequences of the state's dropout problem. Collect as much data as possible on outcomes for student dropouts in the state from the labor, public welfare, and corrections departments.
- Set goals and a timetable for the task force.
- Focus on realistic ways to increase retention rates and reduce the achievement gap. Be sure that districts have a system to identify students at risk and to develop goals and strategies for retaining them. Districts with dropout rates above a state-specified level might be required to establish a corrective action plan.
- Provide a functional definition of children at risk, and develop policy guidelines to provide the array of services that promote school achievement and completion, from preschool education to second chance programs for dropouts.
- Challenge the task force to develop a policy that provides all middle and secondary school students and dropouts their choice of an educational program appropriate to their needs for as long as they meet the state's age eligibility requirements.

## INDIANA

Recently, the Indiana General Assembly enacted a major education reform package, known as Indiana's A+ Program for Educational Excellence. The comprehensive program encompasses twenty-four new and expanded initiatives and will cost $4.5 billion, part of which will be raised by increases in individual and corporate taxes. The A+ Program will change the way schools perform by holding individual schools accountable to parents and taxpayers for their performance and by focusing public education on measurable results in schools. The legislation:

- Establishes a statewide standardized test of educational progress for each student in first, second, third, sixth, eighth, ninth, and eleventh grades. Those with test scores below minimum standards will be required to take a remediation program the following summer.
- Creates an outcome-based, results-oriented accreditation system for each school.
- Establishes mandatory evaluations of all teachers and administrators.
- Institutes a performance-based cash reward program for schools with measurable improved performance over the previous year.
- Adds five more pupil instructional days to the school year and requires "lost" days due to inclement weather to be made up.

Under the program, the State Education Department will also expand Project Prime Time, which is a program to reduce class size in early grades. It mandates an 18-to-1 pupil-teacher ratio in kindergarten and first grade, and a 20-to-1 ratio in second and third grades. The legislation calls for initiatives to improve performance and retention of at-risk students. These include an Educational Opportunity Program for at-risk students, a minority teacher recruitment program, financing of textbooks for children qualifying for free school lunches, and expanded programs using computers in the classroom. New programs will also teach the history, culture, and language of Japan and China. It also will require new teachers to spend a year as an intern teacher under the supervision of a mentor teacher before full certification.

The A+ Program seeks to prepare Indiana children for vastly different future working conditions and for competition in a global society.

## 2

## *Develop a Professional Infrastructure*

- Train school staff and parents in methods that increase student retention.

- Provide technical assistance to local school districts to facilitate student retention efforts. Help districts develop early warning systems that track student progress and respond to unmet needs. Provide models and techniques for parent involvement training and strategies for engaging parents. Establish state dropout prevention resource teams to provide technical assistance to districts throughout the state.

- Seek the advice of corporate recruiters and minority advocacy organizations on planning a specialized campaign to recruit minority teachers and other professionals.

- Promote interagency coordination of services and collaboration with the business sector to obtain the community support and assistance needed for comprehensive dropout prevention programs.

## 3

## *Provide Incentives*

- Consider a childrens' impact law that requires consideration of the potential impact on the state's children before any state law, policy, or regulation can be enacted, similar to environmental impact laws.

- Establish challenge grants to communities to stimulate development of retention programs for at-risk youth, and to encourage achievement of specific performance goals for targeted groups.

> *"Everybody deserves the opportunity to go back to school and get their diploma. We all deserve a second chance at our education. We also deserve a choice between the traditional high school and the alternative school."*
>
> PENNY GRAMS
> Minnesota

- Develop incentives to reward districts that achieve student retention and achievement goals, and sanctions for districts that fail to meet goals.

- Provide financial and other incentives to attract and retain talented and experienced teachers at schools with large at-risk student populations.

- Encourage districts to provide achievement incentives for at-risk students, such as recognition, leadership assignments, or opportunities for employment or college.

- Provide child care and other support services to encourage teenage parents to complete school.

## 4

## *Provide Hope*

- Act as an advocate for the state's population of young people who need to be motivated to achieve in school. Launch a publicity campaign to encourage young people to be productive participants in society. Recommend marketing strategies and tools to encourage students to adopt positive attitudes and set education and career goals for their own success.

### *FLORIDA*

**In 1984, Florida established the Model School Adjustment Program to develop and evaluate model dropout prevention programs. The program targets students in grades four through eight who are likely to become academic underachievers, failures, truants, dropouts, or to manifest severe behavioral problems. The state offers grants for school programs that use a variety of strategies to meet the academic and behavioral needs of high-risk students.**

**In 1984–85, grants were awarded to five districts and a research and validation grant was awarded to Florida Atlantic University to identify variables present during the middle school years that can predict failure or disruption in education. In 1985–86, grants were awarded to ten school districts, along with another research and validation grant.**

**Beginning in 1986–87, Florida is requiring all school districts to establish remediation programs under which qualified school personnel meet with and counsel potential dropouts and, where possible, with the parents or guardians. This is an attempt to alleviate the conditions and problems that increase the risk that these students will drop out.**

**Florida's education department provides a comprehensive technical assistance manual to help local school districts develop effective dropout prevention programs. The Florida Center for Dropout Prevention at the University of Florida in Coral Gables is still another resource.**

# STATE INITIATIVES

States are using an increasing array of exciting and innovative programs to increase school completion rates and demonstrate their commitment to at-risk youth. States can capitalize on this momentum by identifying and supporting dropout prevention measures. Most states are considering the dropout problem at some level. Some have established interagency or education agency task forces to examine the issues before they commit to action. Summaries of a variety of state initiatives appear throughout this report. They are not intended to include all such actions by states.

> *"It is important to look at what is happening to kids who are graduating without skills. This is very important. . . . we have been discovering that all kids, but particularly at-risk kids, lose tremendously over the summer. They can simply slide back to such a degree that we are alarmed to see what is happening. It is important to recognize how early lots of these kids drop out."*
>
> **SIOBHAN OPPENHEIMER-NICOLAU**
> Hispanic Policy Development Project

## *REGIONAL DROPOUT REDUCTION*

**The Governors of *Alabama, Georgia, Kentucky, Maryland, Mississippi, New York, North Carolina, Ohio, Pennsylvania, South Carolina, Tennessee, Virginia, and West Virginia,* in partnership with the federal government, make up the Appalachian Regional Commission (ARC). Recognizing the severity of the school dropout problem among poor rural youth, ARC made dropout reduction in Appalachia one of its priorities. The ARC Dropout Reduction Program was launched in 1985. It awards competitive grants to groups that collaborate to provide comprehensive dropout prevention services. All approved programs must incorporate activities by a combination of schools, parents, businesses, volunteers, and civic organizations. Since 1985, ARC has awarded more than $2 million in grants for eighty-five dropout prevention programs.**

**In addition to funding local projects, ARC has undertaken a number of other efforts to increase the number of students in Appalachia who graduate from high school. These efforts have included:**

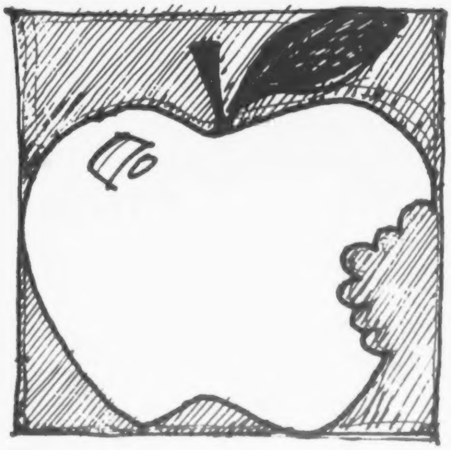
- **The first comprehensive, regionwide study ever conducted on the nature and extent of the dropout problem in Appalachia.**

- **A regional workshop attended by more than 200 educators, local officials, and business leaders to discuss effective solutions to the dropout problem at the local level.**

- **A teacher training outreach program in which more than 2,000 Appalachian teachers received training in dropout reduction strategies.**

- **Development of public information materials for communities across Appalachia to help raise public awareness of the seriousness of the dropout problem.**

# WORKS CONSULTED



Barro, S. 1984. "The Incidence of Dropping Out: A Descriptive Analysis." Washington, D.C.: SMB Economic Research, Inc.

Berlin, G., and Sum, Andrew. 1987. *American Standards of Living, Family Welfare, and the Basic Skills Crisis*. Washington, D.C.: National Governors' Association Center for Policy Research. March 1987.

Campbell Communications Inc. 1987. *Dropout Prevention In Appalachia: Lessons for the Nation*. Washington, D.C.: Appalachian Regional Commission. January 1987.

Carnegie Forum on Education and the Economy. 1986. *A Nation Prepared: Teachers for the 21st Century; The Report of the Task Force on Teaching as a Profession*. Washington, D.C.: The Carnegie Forum on Education and the Economy.

Center for the Study of Social Policy. 1986. "Dropping Out of School: A Literature Review." Washington, D.C.: Center for the Study of Social Policy. August 1986.

Clark, T., and Irizarri, R. 1986. "Identifying School-Based Dropout Prevention Strategies: A Survey of High School and Middle School Programs In Nine Cooperating Districts." New York: Consortium on Dropout Prevention, New York University.

Doss-Willis, H. 1986. *Students At Risk: A Review of Conditions, Circumstances, Indicators, and Educational Implicators*. Elmhurst, Ill.: North Central Regional Educational Laboratory.

Dwyer, B. 1987. Rochester Urban League. Presentation at the Wingspread Conference on Dropout Prevention. Sponsored by the National Education Association Foundation for the Improvement of Education. Racine, Wis. April 1987.

Earle, J.; Fraser, K.; Roach, V. 1987. *Female Dropouts: A New Perspective*. Alexandria, Va.: National Association of State Boards of Education. March 1987.

Education Commission of the States, Business Advisory Committee. 1985. *Reconnecting Youth: The Next Stage of Reform*. Denver, Colo.: Education Commission of the States. October 1985.

Education Commission of the States. 1986. Unpublished summary of background information on at-risk youth. Denver, Colo.: Education Commission of the States. September 1986.

*Education Daily*. 1987. "More Basic Education Needed So Firms Can Teach Specific Skills, Companies Say." Washington, D.C.: *Education Daily*. March 11, 1987, vol. 8.

Hahn, A. 1987. Dropouts in America: Enough is Known for Action. Presentation at Institute for Educational Leadership. Washington, D.C. March, 24, 1987.

Hahn, A.; and Danzberger, J.; with Lefkowitz, B. 1987. *Dropouts in America: Enough is Known for Action*. Washington, D.C.: The Institute for Educational Leadership.

Hedin, Diane. 1986. "Students as Teachers: A Tool for Improving School Climate and Productivity." Washington, D.C.: Carnegie Forum on Education and the Economy. April 1986.

Hodgkinson, H. 1985. *All One System: Demographics of Education, Kindergarten through Graduate School*. Washington, D.C.: The Institute for Educational Leadership, Inc. June 1985.

Hornbeck, D. 1987. Meeting the Needs of Children and Youth At Risk of School Failure: The National Imperative. Testimony to the National Governors' Association Task Force on School Dropouts.

Hurwitz, S. 1987. Committee for Economic Development. Testimony to the National Governors' Association Task Force on School Dropouts.

Institute for Educational Leadership, Inc. 1986. *School Dropouts: Everybody's Problem*. Washington, D.C.: Institute for Educational Leadership, Inc.

# WORKS CONSULTED

Janssen, K.C. 1974. *Matters of Choice: A Ford Foundation Report on Alternative Schools*. New York: Ford Foundation.

Kolstad, A., and Owings, J. 1986. "High School Dropouts Who Change Their Minds About School." Washington, D.C.: U.S. Department of Education. April 16, 1986.

Levin, H. 1972. *The Costs To The Nation of Inadequate Education*. Study prepared for the Select Committee on Equal Educational Opportunity, U.S. Congress, Senate. Washington, D.C.

Lyke B. 1986. *Issue Brief: High School Dropouts*. Updated October 10, 1986. Order Code IB86003. Washington, D.C.: Education and Public Welfare Division, Congressional Research Service, The Library of Congress.

McDill, E.; Natriello, G.; and Pallas, A. 1985. *Raising Standards and Retaining Students: The Impact of the Reform Recommendations on Potential Dropouts*. Baltimore, Md.: Center for Social Organization of Schools, The Johns Hopkins University. April 1985. Report No. 358.

MDC, Inc. 1985. *The States' Excellence in Education Commissions: Who's Looking Out for At-Risk Youth?* Prepared for the Charles Stewart Mott Foundation. Chapel Hill, N.C.: MDC, Inc.

Nathan, Joe. 1984. *Free to Teach: Achieving Equity and Excellence in Schools*. Minneapolis: Harper Row-Winston.

National Foundation for the Improvement of Education, National Education Association. 1986. *Operation Rescue: A Blueprint For Success*. Washington, D.C.: National Education Association. April 1986.

National Governors' Association. 1986. *Time for Results: The Governors' 1991 Report on Education*. Washington, D.C.: The National Governors' Association. August 1986.

Quinlan, P. 1987. National Alliance of Business. Testimony to the National Governors' Association Task Force on School Dropouts. January 13, 1987.

Raywid, M. A. 1984. "Synthesis of Research on Schools of Choices." *Educational Leadership*. April 1984.

Salazar, O. 1987. Tuscon Unified School District. Presentation to the Wingspread Conference on School Dropouts. Sponsored by the National Education Association Foundation for the Improvement of Education. April 1987.

U.S. Department of Education. 1985. *What Works: Schools Without Drugs*. Washington, D.C.: Government Printing Office.

U.S. General Accounting Office. 1986. *Dropouts: The Extent and Nature of the Problem*. Washington, D.C.: Government Printing Office. June 1986.

*Washington Post*. 1987. "Peers Inhibit Black Achievers, Study of D.C. Schools Finds." Washington, D.C.: The Washington Post Co. March 22, 1987.

Weber, J. 1986. "The Role of Vocational Education in Decreasing the Dropout Rate." The National Center for Research in Vocational Education.

Wehlage, G., and Rutter, R. 1986. "Dropping Out: How Much Do Schools Contribute to the Problem?" *Teachers College Record*, vol. 87, 374–392. Spring 1986.

Weikart, D. 1985. "Long-Term Impact of Quality Early Childhood Programs." Paper presented to the National Governors' Assocation Task Force on Readiness.

Wigginton, Eliot. 1985. *Sometimes a Shining Moment: The Foxfire Experience*. Garden City, N.J.: Anchor Press.

Wittebols, J., and Triplett, S. 1986. "Collecting Universal Data on Schools and School Districts: Collecting National Dropout Statistics." Washington, D.C.: Educational Data Improvement Project, Council of Chief State School Officers. September 1986.

# TASK FORCE ON
# TEENAGE PREGNANCY

# TASK FORCE ON TEENAGE PREGNANCY

### *CHAIRMAN*

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"*No human experience is at once so transiently private and lastingly public as an unintended pregnancy. When the mother herself is a young adolescent, only partially educated and almost wholly economically dependent, the pregnancy is inevitably enmeshed in a ragged tapestry of personal, interpersonal, social, religious, ethical, and economic dimensions. The peculiarly human gap between reproductive maturation and social self-sufficiency sets the stage for the problem. Many factors beyond the control—even the ken—of the young people involved complicate the scene. At every point, external expectations batter on newly emerging drives, challenging young adolescents to balance immediate satisfaction and long-range consequences radically disproportionate from anything they have previously had to deal with*" (Hayes 1987, xiii).

More than one million teenage girls in this country become pregnant each year, 400,000 of whom choose to obtain abortions and 470,000 of whom give birth. The remainder of those pregnancies end in miscarriages and stillbirths. Thirty percent of these pregnancies yield second and third births. Often forgotten in these statistics are several hundred thousand teenage boys and young men who become fathers each year. The United States surpasses all other Western developed nations in its rates of teenage pregnancy, abortion, and births. The most arresting difference is found among the youngest teenagers: U.S. girls under age fifteen are at least five times more likely to give birth than their counterparts in any other developed country for which data are available (Hayes 1987, 1).

Over the past two decades the teenage pregnancy rate has not abated and, in fact, has risen slightly (Hayes 1987, 1). However, the rate of births to teenagers is declining, and is, in fact, declining faster among black fifteen- to ninteen-year-olds than among their white counterparts.

At the same time, the percentage of out-of-wedlock births to teenagers is rising. While only a third of all births to teenagers were out of wedlock in 1970, 90 percent of all babies born to teenagers under age fifteen and half of those born to those between fifteen and nineteen were born out-of-wedlock in 1982 (Pittman 1986). This task force has expressly chosen not to highlight differences between out-of-wedlock teenage pregnancies and births and those in which marriage occurs prior to the birth. The myriad problems associated with premature childbearing remain formidable, regardless of marital status at the time of birth, and the separation and divorce rate among teenage marriages is far higher than among older married couples (Hayes 1987, 128).

## Signals for Action

Grounds for alarm and for concerted state action to reduce dramatically teenage pregnancy are compelling. The babies born to teenagers and their very young mothers are the single largest group at risk of poverty and the long-term dependency that states are committed to avoid. These child-mothers have greater risk of receiving prenatal care late—if at all—thus increasing the probabilities of low-birthweight babies who have complex, expensive health problems and babies who die in their first year of life. According to the most recent Maternal and Child Health Data Book, progress in reaching the Surgeon General's goals for reducing low birthweight and infant mortality has ebbed over the past several years, and the United States now ranks last among twenty industrialized nations (Children's Defense Fund 1986).

Births to teenage mothers represent 13.7 percent of all births in the United States and 20 percent of all low-weight births. While the problem is serious across the country, it is particularly so in the South. The sixteen states with the highest proportion of teenage births are all in the South (CDF 1986). Nevertheless, no state can take comfort in its teenage pregnancy and birth rate. In some larger states, where the rates are lower, the absolute numbers of teenage births are extremely high—51,000 births compared to 1,400 births in some Southern states.

## The High Costs of Teenage Pregnancy

Teenage pregnancy and parenting was estimated to cost state and federal government $18 billion in 1986 for Aid to Families With Dependent Children, Medicaid, and food stamp outlays alone. The additional costs of programs such as Head Start, the Women, Infants, and Children supplemental food program (WIC), subsidized housing, child welfare, special education, developmental disabilities, foster care, day care, and other social services have not been calculated. The average family begun by a first birth to a teenager will cost the taxpayer $14,852 by the time the first baby reaches age twenty. This figure climbs to $18,913 if the teenage mother is under the age of fifteen, and to $37,500 if she receives welfare (Center For Population Options 1987).

Many of the causes and consequences of teenage pregnancy and parenting are woven with the same threads that weave through dropping out of school, substance abuse, and adult literacy deficits. Dropping out of school is both a cause and consequence of teenage pregnancy. Since school dropouts are highly likely to be unemployed, they are not engaged in meaningful activities that might divert them from premature sexual activity, which in turn can lead to pregnancy. Only 55 percent of eighteen- and nineteen-year-old mothers in 1982 had completed high school, and males who became fathers before age eighteen were 40 percent less likely to graduate than those who became fathers at a later age (Center for the Study of Social Policy 1986).

## Links With Other Problems

A number of factors make children more likely to engage in risk-taking behavior during adolescence. Among them are weak early attachments to parents; untreated health problems (including emotional health and disabilities); growing up in a poor, disintegrated community; weak educational achievement (often due to weak educational support from their families); and a low sense of opportunity and self-esteem (Jessor 1977). Any of these can lead to the barriers to self-sufficiency: dropping out of school, substance abuse, teenage pregnancy, welfare dependency, and adult illiteracy.

Further, there are complex links between different risk-taking behaviors. For example, adolescent problem drinkers are twice as likely to use marijuana, be sexually active, and exhibit other deviant behaviors (Jessor 1977). Pregnant teenagers who also abuse drugs or alcohol put their babies at much greater risk of birth defects, low birthweight, infant mortality, developmental disabilities and, along with their male companions, child abuse and neglect. Dropping out of school contributes to literacy problems, and may have been preceded by drug or alcohol abuse that exacerbated poor academic achievement, or by teenage pregnancy, or both.

Research shows that achievement in basic academic skills is the glue that holds together self-esteem, motivation to delay sexual activity or to practice contraception, and employability. Recent studies have confirmed and strengthened the links between basic skills, school dropouts, teenage pregnancy, youth unemployment, and welfare dependency. Nothing is more important to helping high-risk youth develop elevated expectations and performance, in and out of school, than educational achievement (Berlin and Sum 1987).

*"I became a teen father at the young age of sixteen. I was living the fast life growing up with the groupies; I was going with the flow with my peer group. I used to mess around with girls from time to time and then finally it caught up with me. I finally got a female pregnant. When she stated the fact that she was pregnant, I couldn't believe it."*

**MARCIUS SCAGGS**
Illinois

The consequences of teenage pregnancy and parenting include dropping out of school, poor employment potential, poor infant health, poverty, welfare dependency, repeat pregnancies, fatherless families, and perpetuation of these cycles among the next generation—the progeny of teenage parents.

## Why Should States Act?

The antecedents and consequences of adolescent pregnancy and parenting are complex. The actions needed to effect solutions are complex and controversial. Why then should states chart a course of action through this minefield? First, because family and children's policy is the province of state government. Second, states, in collaboration with their local communities, are in closer touch with the values, needs, and behavior patterns of their distinctive population groups. They are in the best position to tailor policies and actions to these groups. Third, the monetary cost of inaction has been steep. Fourth, some states have already charted the course and have implemented an array of programs to address teenage pregnancy. Other states can borrow from and adapt these programs. Finally, this task force reached the inescapable conclusion that states could ill afford not to act. The highly skilled, technologically advanced, healthy and literate labor force that will be needed in the years ahead demands that not one potential member be wasted. States must act now to enhance the basic skills and perceived life options of infants and children, and thus the adults they become, to reduce the barriers that adolescent pregnancy and parenting present to individual self-sufficiency, productivity, and fulfillment.

Teenage pregnancy and parenting is not just a minority problem, not just a regional problem, not just an out-of-wedlock birth problem, and not just a female problem. It is everybody's problem. The challenge to the nation is to face the problem squarely and adopt strategies to prevent several hundred thousand adolescent boys and girls from mortgaging their futures, the future of their babies, and the future of this nation.

### ARKANSAS

A school-based program for pregnant high school students in two Arkansas counties is operated by The Parent Center. The program is a cooperative, comprehensive effort between public and private agencies.

Services provided in the program include: a vocational skills course for credit toward high school graduation, which helps young women acquire skills to support themselves and their children; parenting education; assistance in goal setting; individual and group counseling; crisis intervention; advocacy for other needs; complete prenatal and postpartum health care; and ongoing education and support outside of school on a weekly basis through the MELD Young Mothers program.

The program is funded by the Arkansas Department of Health, which provides all health care; the Little Rock School District; United Way of Pulaski County; Winthrop Rockefeller Foundation; Title XX; and The Levi Strauss Foundation.

The Parent Center is completing its third year and 143 young women and about thirty teenage fathers have participated. Among the participants, the school dropout rate is only 20 percent, compared to a much higher rate nationwide. There have only been two repeat pregnancies out of the 143 mothers. Also, all six seniors eligible to graduate last year did so. Of these six, two went on to attend college, two found employment, and two went into the armed forces. All seven senior participants in the program this year are scheduled to graduate. There have been very few health problems with the babies or the mothers in the program.

The total cost of the program is about $100,000, which the executive director points out is less than it would cost to keep one premature baby in intensive care for the average two-month stay.

# ELEMENTS OF A STRATEGY

Over the past dozen years, a significant number of local and state-local collaborative efforts have been developed to prevent teenage pregnancy, serve pregnant and parenting teenagers, or both. Some would argue that data on the results of these efforts is limited. The task force concurs. Further research needs to be conducted on the impact of various initiatives to prevent teenage pregnancy and help teenagers who are parents; states and local communities are urged to conduct it. But as David Hamburg of the Carnegie Corporation has noted, "We'll never know as much as we like, as evaluations are difficult and can divert resources from the strategies themselves. But we know enough to act and we can't afford not to act. We'll simply have to settle for less rigor" (Hamburg 1987).

Nevertheless, much is known from research about the factors that can lead to sexual activity and about the impact of some efforts. Teenagers are more likely to have early sexual activity if:

- An older sister or mother was a teenage parent.

- Parental involvement in the teenager's life is weak or communication is strained or limited.

- Parents, siblings, or the teenager have low educational attainment. The lower the level of education, the earlier sexual activity is likely to occur.

## MISSISSIPPI

**For many years, children born in Mississippi had a poorer chance of living until their first birthday than children in other states. This high infant mortality rate, along with an equally high rate of irreversible damage at birth, led concerned Mississippians to join together to promote improved maternal and child health care. The result was the Mississippi Perinatal Awareness Project.**

**The project brought together health care providers, advocates, and state government with the goal of meeting the Surgeon General's target of a 35 percent reduction in the infant mortality rate by 1990. The project promoted awareness of new and expanded services through the distribution of posters, buttons, and flyers to health and welfare departments, physicians, hospitals, schools, and community agencies where low-income consumers would see them. Television and radio spots were also used. A coalition of maternal and child health care providers and advocates was developed and a bi-monthly professional health care journal, "The Mississippi Perinatal Update," was developed.**

**The direct and indirect results of the project can be measured in several ways. Legislation was enacted expanding the state's Medicaid program to include married poor women and their children who were not on AFDC, thus allowing 1,500 pregnant women and 9,100 children to be added to the program in the first year. Based on recommendations from project leaders, private sector fees to physicians performing perinatal services were increased to encourage physicians to take medicaid patients. The Governor's statewide toll-free service line handled 3,625 calls regarding the need for maternity and infant health care. Those calls came from every county in Mississippi. Most dramatically, during the project period of 1983–86, infant mortality in the state was reduced by 11 percent. Such a rate of reduction, if it continues, will exceed the projected national rate of reduction for infant mortality.**

***NOTE:***
The Governor's Service Line handled 3,625 calls between 1983 and 1986 regarding maternity and infant health care. Those calls came from every county in Mississippi. During this period infant mortality in the state was reduced by 11 percent.

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- They live in economically depressed areas. Poor black teenagers are twice as likely to initiate sexual activity at a given age than the average black urban teenager of the same age. Pregnancy rates are lower in rural counties and increase commensurately with the level of urbanization in counties.
- They have low self-esteem and low aspirations.
- They engage in other risk-taking behavior, such as drug and alcohol use.

Research also shows two other interesting factors. Teenage girls who live with their fathers tend to defer sexual activity. And, half of all metropolitan teenagers have engaged in sexual activity, compared to 40 percent of all teenagers.

The earlier sexual activity begins, the more vulnerable the at-risk youth becomes. This is true because half of all teenage pregnancies occur within the first six months of sexual activity; among teenagers younger than fifteen, only three in ten used contraceptives at first intercourse, compared to five in ten at ages fifteen to seventeen, and six in ten at ages eighteen and older. Low usage is strongly related to ignorance about where to get contraceptives and how to use them.

> ***"Being in an apartment on my own, having to be a mother and also dealing with teenage pregnancy was very difficult for me—sometimes I used to cry all night. My friends used to come knocking at my door and say 'come on let's go hang out.' And here I was. I wanted to hang out and have fun, go out dancing or go to the movies, but yet I had a responsibility. It was a burden, and then I thought, am I ever going to get through this time? It was difficult—there was no case management, no one to talk to you, no one around."***
>
> **MARIA GARCIA**
> New York

Armed with this information, states can target prevention programs at preadolescents (twelve- to fourteen-year-olds) and adolescents (fifteen- to eighteen-year-olds) in those risk groups. However, it is vital to bear in mind that sexual activity and parenting among teenagers is closely linked to the environmental conditions, so focusing on sexual activity, per se, as the cause of teenage pregnancy will constrain the effectiveness of a state's ability to address the problem.

## Critical Ingredients

Because the causes of adolescent pregnancy and other risk-taking behaviors are so complex, so must be the solutions. Experience has shown that no single, discrete initiative works in isolation to prevent teenage pregnancy or to serve already pregnant and parenting teenagers. Multiple, coordinated initiatives are essential for a comprehensive and, thus, effective response to the problems.

A state strategy to reduce teenage pregnancy and to assist pregnant and parenting teenagers needs to begin with goals. The task force urges states to establish their own numeric goals to reduce first pregnancies and repeat pregnancies; increase the number of teenagers who complete high school; increase the number of pregnant teenagers who receive early, regular prenatal care; reduce the number of low birthweight babies and infant mortality; and reduce the number of teenage parents who need public assistance.

## Prevent the First Pregnancy

By almost any social or financial measure, it is less costly and more effective to prevent pregnancy than to intervene in the consequences. This means providing teenagers with the motivation and the means to avoid pregnancy. Important ingredients are to develop state and local initiatives to postpone teenage sexual activity through family life and sex education courses; make available and promote the use of contraceptives; imbue male teenagers with the abiding knowledge that creating a baby also creates an eighteen-year financial obligation; and enhance basic skills, self-esteem, and the perception of positive life options. Teenagers must believe that there are plenty of good answers to the questions, "Why not get pregnant?" or "Why not get someone pregnant?"

***Defer Sexual Activity.*** Common sense and research indicate that programs aimed at deferring sexual activity prevent or at least defer the first pregnancy. A formal evaluation of the Self-Help Center Clinic operated by The Johns Hopkins School for Medicine demonstrated an average delay of seven months in the initiation of sexual activity among teenagers with three years exposure to the clinic.

***Contraceptives.*** For those teenagers who have become sexually active, effective, informed, consistent use of contraceptives by males and females has been shown to prevent pregnancy.

***AIDS, Morals, and Sex Education.*** As concern grows over how to protect children from acquired immune deficiency syndrome (AIDS), as well as from premature sexual activity, the U.S. Surgeon General urges sex education beginning in elementary school, some groups argue for the teaching of moral values in sex education curriculums, and others press for "Just Say No" campaigns. There is no evidence from the National Academy of Science's intensive review of the research that sex education hastens the onset of sexual activity. There is no research at all about the efficacy of "Just Say No" campaigns or of teaching moral values in public school sex education courses. States are encouraged to develop demonstration projects using various approaches, including these, coupled with rigorous evaluations. By doing so, they will be better informed to make appropriate resource allocation decisions in the future.

***Life Options and Self-Esteem.*** There are many ways to increase teenagers' awareness of options in life and to increase self-esteem. One is to develop a "mentors and models" program. In New York City, a businessman "adopted" the sixth grade class of a disadvantaged Harlem elementary school from which he graduated. He guaranteed a four-year college education to each child who remained in school through twelfth grade. Every Saturday, the mentor and his business colleagues have met with the students to review academic progress and problems, to tutor, and to discuss the world of business and the colleges and careers the students might pursue.

At the same time, there has been a small but growing trend among school districts to offer high school credit for students who engage in community volunteer work. States should consider expanding these efforts by encouraging local school boards to offer credit to at-risk high school students who become mentors for at-risk middle school students. Under this plan, the high school students would tutor middle school students who have basic skills deficiencies. The program could: improve the self-esteem of tutors by making them feel needed and important, and offer an incentive to keep up with their studies so they can help their students; enhance the basic skills and life options of the middle-school students; and give the tutors and students something positive to do after school when they otherwise would be going to empty homes or "hanging out." Since students with lower than average basic skills lose academic ground over the summer and lack positive ways to spend their time, this program could also be run during the summer.

Life options and self-esteem promotion should begin by age twelve and continue through high school.

***Educational Achievement.*** Studies have shown that educational achievement is one of the most accurate predictors of employment and economic self-sufficiency, but they also show that only 50 percent to 60 percent of adolescent girls who become mothers finish high school. Programs that keep teenage mothers (and fathers) in school and provide positive learning experiences are a critical ingredient of an intervention strategy. On the other hand, research also shows that many teenage women drop out of school first, and become pregnant within several months after leaving school (Moore and Waite 1978). Thus, programs that enhance the educational achievement of teenage girls and retain them in school are a critical ingredient of a pregnancy prevention strategy.

***Comprehensive Health Clinics.*** States are urged to encourage communities to set up comprehensive health clinics in or near the schools in high-risk areas. Such clinics offer a wide range of services, only some of which are directed at pregnancy prevention. Services include comprehensive laboratory screening; diagnosis of health disorders; physical examinations; treatment of minor injuries; tests and treatment for sexually transmitted diseases; counseling about sexuality; gynecological exams; birth control referrals; and follow-up exams for birth control users. A few clinics offer birth control prescriptions. Often these clinics provide the first comprehensive and diagnostic health care youth have received in years and treat injuries that would otherwise go untreated. The research reveals these results:

- The teenage fertility rate dropped 40 percent over ten years (St. Paul Clinic);

- The school dropout rate declined from 45 percent to 10 percent in three years (St. Paul Clinic);

- The repeat pregnancy rate among mothers who stayed in school was only 2 percent (St. Paul Clinic);

- Hospitalizations and school absenteeism were reduced (West Dallas Clinic);

- Suicide rates and drug abuse were reduced (other clinics).

These clinics generally are not financed by the school board, nor are they staffed by school personnel. Rather, they use the school's physical plant or they locate close to the school to offer teenagers ready access to health services. Clinics have been planned and operated by local hospitals, medical schools, public health departments, community clinics, and Planned Parenthood affiliates. Financing is obtained from federal, state, and local funds, as well as private foundations and corporate grants. The latter two sources, however, are often time-limited and run the risk of dooming the clinics to a shorter life span unless regular public funding is appropriated.

## *COLORADO*

**Colorado is attacking its teenage pregnancy problem by challenging committed individuals in communities to work together to identify the problem, inventory resources, and develop their own plan of action. The Governor's Staff Working Group on Teenage Pregnancy was formed in October 1985 with eight state departments. It has funded ten demonstrations across the state. Using the Governor's Job Training Partnership Act discretionary funds and vocational education and Work Incentive program funds, training and employment programs were developed and tied closely to health, social services, and other components. This provides a strongly coordinated approach that enables pregnant teenagers and young parents to become self-sufficient.**

**The more recent Governor's Initiative on Teenage Pregnancy has seen three foundations and the Junior League commit $300,000 per year for three years to fund similar community projects across the state that emphasize pregnancy prevention. A community council of influential business, religious, and legislative leaders has been formed to guide this initiative and advocate its goals.**

*Focusing on sexual activity, per se, as the cause of teenage pregnancy will constrain the effectiveness of a state's strategy to ameliorate their teenage pregnancy and parenting plight.*

*"Every day, 40 teenage girls give birth to their third child."*

**DAVID W. HORNBECK**
Maryland State Superintendent of Schools

## Reinforce Parental Responsibility Over Teenagers

The role and capacity of the parents to take responsibility for the sexual behavior of their teenage children and its consequences must be reinforced. Ingredients needed for this strategic element include parenting education courses for parents of teenagers, and sex and family life education courses that help teenagers and their parents learn to communicate about sexuality, substance abuse, and preventive health. These courses can be delivered in regular school classes and materials for parents can be sent home, or they can be delivered by parent-teacher organizations, religious institutions, and a variety of community organizations. State policy must reinforce the family's role in communicating moral, religious, and cultural values to their children. This role has not been and cannot be assigned to the state.

***Child Support.*** As citizens and taxpayers, adults in this country believe that the support of children is primarily the responsibility of their parents—their fathers and mothers. This belief influenced the Congress to unanimously pass sweeping amendments to child support enforcement laws in 1984, that substantially strengthened the tools available to states to establish paternity and to establish and collect support orders. However, the law is largely honored in the breach when it comes to teenage fathers. Most of these fathers do not earn enough to support their babies while they are teenagers, and have thus not been seriously pursued for child support enforcement (Rivera-Casole and Klerman 1984). But by establishing paternity and assisting these young men with training and employment for future earnings, their babies' birthright is preserved. Failure to do so sends the wrong subliminal message to the fathers: "Responsibility for a baby rests solely in the mother's lap—you bear none!" This message must be changed.

Sex education and family life education courses should include information about male financial responsibility for their offspring. This information should be communicated both to the teenagers and to the parents of teenagers. Curriculums must include facts about establishing paternity, the setting of support orders, and the extensive arsenal of sources from which states can locate absent parents and collect child support. Media campaigns that communicate this information should include advertising on teenagers' favorite radio stations and posters on mass transit systems and in public health clinics, social service agencies, recreation centers, and stores.

## Reduce Repeat Pregnancies

Among adolescent girls whose first pregnancy ended in a live birth, 30 percent had a subsequent pregnancy within two years, as did 25 percent of those whose first pregnancy was terminated by abortion (Hayes 1987, 203). To reduce repeat pregnancy, the barriers often caused by the first birth—dropping out of school, unemployment, little or no income, inadequate child care, dependence on public assistance, and social confinement—must be reduced. As one Illinois teenage parent stated, "Being a teenage parent is like being grounded for life."

***School Retention.*** State strategies should try to keep the young mother and father in school. Mothers who dropped out during the pregnancy should be encouraged to return to school or enroll in an alternative school. State education laws must be examined and changed if they prohibit a dropout from re-entering school within a year after leaving.

***Abortion Reduction.*** States that provide publicly funded abortions should develop coordinated systems to link teenagers to other health, education, and social services, and especially adoption referral services. These strategies would strive to reduce the occurrence of repeat abortions.

***Child Care.*** Quality child care at or near the school has consistently been shown to be essential to the mother's completion of school, job training, and employment (Burt and Kimmich 1984). While some teenage mothers who reside with their parents may be able to rely on them for child care, this is a shrinking option since their own mothers are likely to be working. School-based child care is controversial among some school boards and officials, who view it as an expensive service beyond the scope of the schools responsibility. Further, school liability insurance regulations may prevent the teenage mother from transporting her baby on public school buses. On the other hand, where such services have been instituted, teenage parents are usually required to spend some part of each day in the child care center, and so the center becomes a living laboratory for teenage parents to learn the basics of infant care, nutrition, and child development.

As an alternative to school-based child care, states should work with communities to establish child (especially infant) care centers in neighborhoods where teenage births are prevalent. States could give higher priority to funding centers that are established in high-risk neighborhoods, using the Social Services Block Grant and other funds.

***Work.*** Training and employment services to teenage parents are an essential ingredient of any state strategy to reduce long-term dependency on public assistance. Employment and training services must be offered to teenage fathers as well as mothers. Some local jurisdictions have been successful in enlisting young fathers in employment and training programs by temporarily reducing the child support order until their wages rise enough to warrant an increase.

Teenage mothers who are already receiving public assistance are exempt from registering for the federal Work Incentive (WIN) program if their children are under the age of six. However, there are clear advantages to not delaying entry into the workforce because it reduces long-term welfare dependency for the mother. Illinois and Massachusetts have shown success in encouraging many mothers of children under age six to volunteer for work programs, especially where child care is provided by the state.

### *Meeting Special Needs*

***In New York, no one community's teen pregnancy prevention plan is a carbon copy of any other. Each plan is tailored to fit that community's special needs. For example, in one community, a Hispanic youth center provides health services and new opportunities to develop talents and self-expression. A second component of the plan provides group housing for teenage mothers and their children, while a third provides high school equivalency programs for youth at a senior citizens center.***

## NEW YORK

**In February 1984, the Governor announced a multimillion dollar, statewide adolescent pregnancy and prevention initiative designed to reduce teenage pregnancy, make better use of existing support services for those who become pregnant, and create needed additional services. A coalition of concerned professionals and lay people was assembled to work with the Governor. The initiative focuses prevention in high-risk communities that exceed the average statewide teenage pregnancy rate and the poverty rate; increases opportunities for self-sufficiency; enhances coordination for services at all levels; and assures the broadest possible involvement of the community.**

**The state conducts a competitive grant process for local communities funded with almost $8 million of state funds. To qualify for grants, the communities are first asked to document the level of need, describe the local planning process, and identify problem areas. Second, communities are expected to identify appropriate providers to implement new service components and to formalize linkages to improve access to existing resources.**

**As a result of New York's strategy, no one community's plan is a carbon copy of any other. Each plan is tailored to fit that community's special set of needs. For example, in one community, a Hispanic youth center operating out of an old church provides health services and new opportunities to develop talents and self-expression. A second component of the plan provides group housing for teenage mothers and their children, while a third provides high school equivalency programs for youth at a senior citizens' center.**

## Cushion the Consequences to Teenagers' Children

Community outreach programs that bring pregnant teenagers into early and regular prenatal care are a vital first step in reducing the incidence of low birthweight; programs to reduce the infant mortality rate are the obvious second step. The U.S. Surgeon General's goals for 1990 are for 90 percent of all pregnant women to receive care within the first trimester of pregnancy; for an overall low birthweight rate not to exceed 5 percent; and for the infant mortality rate not to exceed nine deaths per 1000 live births. States need to recharge the battle against low birthweight and infant mortality. Overall progress has slowed and at the current rate, at least forty-two states are not expected to meet the Surgeon General's low birthweight goal and eleven states will fail to meet the infant mortality goal (CDF 1986). At least fifteen states will fail this goal for minorities and another thirteen had insufficient data upon which to judge improvement in the goal for minorities. Some states have targeted low birthweight and infant mortality prevention on adolescents as an entree into the teenage pregnancy problem without the accompanying public controversy that some strategic elements can generate.

### ILLINOIS

**Parents Too Soon is a comprehensive, coordinated program mandated by the Governor in 1983 to combat "the epidemic of teenage pregnancy." Illinois' commitment of $12 million in fiscal 1987 makes this the most heavily endowed state program in the U.S. With the active involvement of ten state agencies, the program now sponsors 125 community-based projects. Parents Too Soon programs are funded in county public health centers, hospitals, public schools, church-affiliated service centers, and social service and mental health centers. Communities are partners with the state in developing programs to fit individual community needs.**

**Parents Too Soon is designed to deter both teenage pregnancy and its negative consequences. Results have been impressive. At the Mile Square Health Center project serving some of Chicago's poorest neighborhoods, the low birthweight rate of project participants has been reduced to 8 percent, compared with the neighborhood rate of 14 percent. At a rural project in Southern Illinois, none of the 150 participating teenage mothers have experienced a repeat pregnancy after twelve months in the project. Twenty-five of these young parents are enrolled in the local community college, and three made dean's list last semester.**

**The welfare department operates a component to help teenage parents finish their education or obtain employment training and find work. After three years of operation, nearly 65 percent of program clients are enrolled in school, training programs, or work.**

**Parents Too Soon also reaches out to teenagers through radio and television. A media campaign lets teenagers talk about the harsh realities of being a parent too soon. The "Speaking for Ourselves" campaign features public service announcements, a twelve-minute documentary, posters, billboards, and bus cards. A songwriting contest among teenagers was sponsored with the help of the rock disc jockeys of the state. The winning song, "Too Fast," is now being played across the state. Its refrain sums up the message: "STOP! Don't go any further. STOP! And think about the future."**

***NOTE:***
At a rural project in Southern Illinois, none of the 150 participating teenage mothers have had a repeat pregnancy after twelve months in the project. Twenty-five of these young parents are enrolled in the local community college; three of them made the academic dean's list last semester.

***Early Childhood Development.*** There is limited evidence that being the child of a teenage parent affects a child's intelligence and academic achievement. Differences in learning ability (cognitive functioning) between children of teenage parents and children in the larger population show up in preschool years and continue into elementary school and beyond. However, these effects are linked closely to the likelihood that teenage parents are poor and less educated and that their children tend to grow up in disadvantaged neighborhoods, attend lower quality schools, and suffer from family instability (Hayes 1987, 134). A fifteen-year follow-up study of graduates of a program similar to Head Start found they were more likely to have completed high school and gone on to vocational and academic training than their peers who did not participate in an early childhood program. The graduates were also less likely to be receiving public assistance, to be in trouble with the law, to be teenage parents, or to be unemployed (Schweinhart and Weikart 1980).

Programs targeted to teenage parents and their children can try to identify and help developmentally delayed children and those children at risk. A new provision of the Education of the Handicapped Act offers Governors the opportunity to plan and execute such programs for "handicapped infants and toddlers" from birth to two years of age. This is a fine example of a primary prevention program.

***Shelter.*** States need to provide for the increasing number of pregnant teenagers and teenage parents and their children who are homeless. Few states and communities have adequate homeless shelters to accommodate the special needs of mothers and their young children. In March 1987, Travelers Aid agencies began reporting a change in the basic population they serve, with a greater percentage of their clients being families and their children. A recent study of homeless children revealed their average age to be six years and 43 percent of those old enough to attend school were not attending (Maza and Hall 1987, 2).

> ***"Children don't have enough positive things to do with their time. And we've got to figure out a way to keep them busy . . . to keep them off the street, and in order to keep them off the street we're going to have to put constructive alternatives in place. We need to figure out how we can keep schools open around the clocks, on the weekends, in the summers, so that our young people are constructively engaged. But again, focusing on the schools is a very important first step."***
>
> **MARIAN WRIGHT EDELMAN**
> Children's Defense Fund

> ***Illinois and Massachusetts have shown success in encouraging many mothers of children under age six to volunteer for work programs, especially where child care is provided by the state.***

***Adoption.*** Adoption is a severely underused option for pregnant teenagers, and yet it could improve the lives of babies born to many teenagers. Adoption services in this country are inadequate, fragmented, and underused. The fragmentation deters some pregnant teenagers from considering and planning for adoption. There has been a dramatic decline in adoption placements since the 1960s. Ninety-one percent of white and 95 percent of black teenage mothers kept and raised their own children in 1982 (Hayes 1987).

Comprehensive adoption services should identify and reach out to pregnant teenagers early in pregnancy. A case management approach would determine needed services and refer the teenager to a variety of programs. It should include: education, counseling, prenatal care, and nutrition services during pregnancy; housing, if needed; obstetrical care for labor and delivery; identification and selection of adoptive families; and provision of legal services to the birth mother during the adoption process. In too few cases, this comprehensive service package is provided in a residential facility. Maria, a teenage parent, told Governors in February 1987 that the first counselor she ever saw said, "Oh, wow! You have to get an abortion!" Some months later, when Maria was staying in a maternity shelter, she found "no counselor and no case management."

More extensive data collection and reporting requirements on adoption agencies—both public and private—are needed to assess counseling and service gaps. Second, states should provide planning grants to selected communities to plan and implement comprehensive service packages in family planning clinics, public health clinics, and other facilities, to encourage adoption among pregnant teenagers. Post-adoption counseling should be offered by adoption agencies. If evaluation of these grant projects shows success, they can be expanded to other communities.

***Parenting Education.*** Parenting education is a crucial component of any effort to mitigate some of the undesirable consequences of being born to teenage parents. Although research does not support the theory that child abuse and neglect is more prevalent among teenage mothers, it is more prevalent among families of low socioeconomic status (Hayes 1987, 137). Since teenage parents cluster in that status, child abuse and neglect prevention must be a cause for concern and action.

> *"Most of the time the media overlooks the male in that relationship. It takes two people to make a baby. The males generally do it because of lack of education, lack of things to do—you know, they're just bored—so they just want to go out and have sex. So they drag the woman into it and generally get her pregnant and a baby comes along. Then the man is ready to leave and he leaves the woman stuck with a newborn child and not knowing what to do."*
>
> **MARCIUS SCAGGS**
> Illinois

## Increase Attention on Males

Equal attention should be focused on young males, both for pregnancy prevention and for services to pregnant and parenting teenagers. The male's motivation, capacity, and behavior is as vital as the girl's to avoid premature pregnancy and parenting, or to become an effective parent. Males should be part of the solution. Efforts to prevent premature pregnancy should include encouraging males to postpone sexual activity; offering family life and sex education courses; making available and promoting the use of contraceptives for those who are sexually active; and enhancing basic skills, self-esteem, and life options. It means reaching out to parents to encourage them to be responsible for their sons' sexual behavior and its consequences. It means communicating paternity responsibility and the realities of child support enforcement. It means including the fathers, wherever possible, in parent education courses, regardless of whether they have married the mother. It means that boys and young men who have caused a pregnancy should be counseled about adoption so they can counsel their partner about this option. And it means targeting training and employment programs to unemployed, out-of-school teenage fathers so they can achieve economic self-sufficiency for themselves and, eventually, for their children.

Governors can balance state resources more equitably between services offered to male and female teenagers. Governors can ensure that teenage fathers, as well as mothers, are included in the design and development of programs at the state and community level. In designing programs, attention must be paid to the fact that boys and young men do not participate in programs billed as "male responsibility classes." The message must be interwoven into broader programs offered by Boys Clubs, Urban League chapters, and other local agencies that are trusted conveyors of information to young males.

In summary, the critical ingredients of a state strategy to prevent adolescent pregnancy and to serve pregnant teenagers and teenage parents must be comprehensive. But they also are linked inextricably to other adolescent problems facing state government and the nation: school dropouts, drug and alcohol abuse, untreated health problems, teenage unemployment, and welfare dependency. The best state strategy to reduce teenage pregnancy will be a comprehensive attack on the mosaic of problems facing adolescents.

# AGENDA FOR STATE ACTION

There is no single agenda for action since each state must respond to the cultural, religious, and social values of its communities, and tailor its actions accordingly. Every comprehensive state action plan will include components that will be controversial among some constituents. Close cooperation among the Governor's office, executive agencies, and local communities will be vital to success. Because no single action or initiative will have a positive effect on the incidence of teenage pregnancy or childbearing, multiple initiatives operated simultaneously are essential to success.

A 1985 NGA survey of all states identified four critical factors that drive the development of the Agenda for State Action. These are:

- Leadership in the Governor's office.

- Creative reallocation of existing funds and pooling of funds from multiple sources, including federal programs, new state monies, local funds, and private sources.

- Broad interagency collaboration.

- Community involvement of public and private figures at the local level *(Kimmich 1986)*.

## 1

## *Determine Who's Affected*

- Conduct a survey of schools to determine the numbers and characteristics of students who became pregnant in the past year.

- Survey public health clinics and hospitals to determine services to pregnant teenagers and the number of deliveries, low birthweight babies, and infant mortalities.

- Survey nurse-midwives in rural areas and abortion clinics to estimate the number of pregnant teenagers they have served. Survey public and private adoption agencies to determine the number of babies who were relinquished, and the pre- and post-birth services provided.

- Request data from public assistance files on cases where eligibility began when the head of the household was nineteen or younger.

## 2

## *Estimate the Costs of Inaction*

- Estimate the current costs to city, county, and state government from teenage childbearing. This information will help Governors garner public and legislative support for prevention efforts. A handbook with in-depth instructions, tables, and worksheets, or a computer software package is available from the Center for Population Options as a first step in this effort (see Teenage Pregnancy Supporting Works). However, this methodology is believed to yield very conservative cost estimates that focus exclusively on public assistance costs. States need to acknowledge the additional costs of neonatal care, special education, child welfare, foster care, subsidized housing, and more.

## 3

## *Profile, Target, and Inform*

- Use survey information to create a profile of the state's high-risk communities and populations.

- Disseminate this profile and the cost information to legislators and communities. The importance of assembling quality information on the teenage pregnancy problem in a state, and using it effectively, cannot be overestimated. Because resources are limited, careful targeting is needed. For example, pregnant nineteen-year-olds are less at risk than younger girls and certain resources could be conserved for the younger population.

### CONNECTICUT

**The state Department of Health Services is now engaged in a wide variety of services in the area of adolescent pregnancy. These can be divided into two basic areas: technical assistance and funding.**

**In the area of technical assistance, department staff regularly conduct workshops for communities, professionals, and other interested groups. They promote the development of local programs to address the problems associated with teenage pregnancy and respond to numerous inquiries from the public and other agencies. Staff also run the statewide Young Parents Coalition and the School-Based Clinic Network.**

**The department spends $295,000 on school-based health clinics in New Haven (one in a high school, one in a middle school) and Bridgeport (two in high schools), as well as planning grants to five communities. Additionally, a dozen communities receive $287,000 for parenting programs.**

> ***"My mother was a teenage mother and her mother was a teenage mother. But I wanted to break the cycle—I wanted a better life for my daughter."***
>
> **MARIA GARCIA**
> New York

> ***". . . once you get a baby, it's real hard—you have to give up all of your free time. You have to see the child and make sure that the child has what it needs. In this process, it takes education—without education, you're not going anywhere too fast."***
>
> **MARCIUS SCAGGS**
> Illinois

■ Develop a list of towns, cities, suburbs, rural areas, school districts, and population groups most in need of prevention or intervention services. The Governor can use the ranking of the incidence of teenage pregnancy by legislative district to lobby representatives for appropriations, for example, for health clinics, child care, and parenting education courses. The Governor can distribute the information to school boards, mayors, and other local officials to demonstrate concern and to initiate community support for prevention and intervention programs.

## 4

## *Determine What's Being Done*

■ Catalog the programs currently in operation, the agencies operating them, and the source of funding. This is a prerequisite to the process of imposing executive-level coordination on programs, and pooling and reallocating funds to a more comprehensive, targeted action plan.

■ Provide the catalog as a resource guide to communities so they can consider adopting other communities' strategies and programs. Include contact names and phone numbers.

## 5

## *Mobilize*

- Create a broad commitment across state agencies.

- Establish a cabinet cluster or interagency policy committee on teenage pregnancy that includes representatives from health, education, social services, financial assistance, and employment agencies. Be sure to include the department of revenue and the courts, if they are responsible for the child support program.

- Institute a process to formulate policy across agencies.

- Create opportunities and inducements for public/private collaboration. Set up task forces of business leaders and agency directors.

- Hold public hearings to heighten awareness, and include testimony from pregnant teenagers, male and female teenage parents, and their parents. Southern Governors and legislators enlisted business leaders in efforts to improve the health of pregnant women and infants (Southern Corporate Coalition 1987). Consider this approach to the teenage pregnancy issue.

- Refine the issues. Review any research available on the state.

- Develop an Agenda for State Action compatible with the needs of the state and the values of its communities. Draw on the critical elements of a state strategy. Determine the points of prevention and intervention most appropriate for the state's at-risk communities and groups, so the Governor's office can actively solicit their cooperation and participation.

> ***"So many people insist on looking at teen pregnancy as a health issue or as a contraception issue when the best thing we can do to prevent teen pregnancy and welfare dependency is to give young people strong basic skills. So to the degree that you emphasize education and focus on at-risk children, you could not be doing anything more important."***
>
> **MARIAN WRIGHT EDELMAN**
> Children's Defense Fund

## 6

## *Plan and Budget*

- Develop measurable numerical goals for reducing the teenage pregnancy rate statewide and by community, reducing the low birthweight rate among adolescents, reducing the infant mortality rate, and for increasing the rates of early prenatal care. Build on the Surgeon General's goals for 1990. Publicize the new goals to state institutions and the legislature.

- Develop a comprehensive strategy that uses a combination of local, state, and federal resources. States have successfully leveraged federal and local money with state matches.

- Encourage local foundations and businesses to offer challenge grants to local communities for specific program ingredients. In the budget reallocation decisions, Governors should make certain there is an appropriate balance between prevention and services to pregnant teenagers and teenage parents. Balance is further needed between existing programs and needs that may surface as goals are set.

*"I can't pay child support. I'm in school and I don't have a job."*

*"The state welfare program may help your child and the mother. But you are building up a debt with every welfare payment they get—and you will have to pay it back."*

*"But suppose I have a lot of bills, car payments and payments on my stereo?"*

*"Child support must come first. . . . You might have to give up the car or the stereo—or both!"*

"LOOKING BEYOND TEENAGE PREGNANCY"
Georgia Child Support Brochure

## 7
## *Act*

- Create and maintain broad public support for the Agenda for State Action. Encourage intracommunity coordination through mechanisms such as competitive grants and challenge grants that tie awards to the level of involvement of public and private community groups in the planning, application, and implementation process.

- Publicize the program. Use public service announcements on radio and television. Distribute posters to mass transit systems, schools, clinics, human services offices, churches and synagogues, stores, and other places. Provide funds for local and regional conferences to publicize the goals and the Agenda for State Action to meet those goals.

## 8
## *Maintain Accountability*

- Take the lead to communicate the need, mobilize community support, establish goals and priorities, enforce interagency collaboration, and mobilize resources.

- Hold state and local agencies accountable for implementing the goals outlined in the Agenda for State Action. Performance contracting is one method of accountability. Even more fundamental is a need for the Governor's office to follow through on initiatives, to inquire about progress and any additional assistance that might be required.

- Evaluate program initiatives that lack a sound research base so future resource allocation decisions can be refined.

There are a significant number of state efforts and state-local collaborative efforts to prevent adolescent pregnancy, serve pregnant teenagers and teenage parents, or both. The 1985 NGA state survey showed that nine states had coordinated comprehensive programs and thirteen more had established interagency task forces to recommend comprehensive strategies to their Governors' offices. The remaining twenty-nine states were operating single-agency efforts or isolated local efforts. Since 1985, a few more of the task force states have developed coordinated, comprehensive programs.

The programs presented in this report provide some flavor of the variety of initiatives. Space prohibits a full catalog of state initiatives, so a sample representative of different delivery models, funding mechanisms, geographic areas, and partnership arrangements is offered. What is highlighted in one state's program does not necessarily mean it is absent from others. Selected ingredients from the Elements of a State Strategy are discussed.

## GEORGIA

**A Looking Beyond Teenage Pregnancy project in Georgia features a cartoon tabloid to spark classroom discussion concerning decisions about teenage males' futures, sexual behavior, parenting prospects, marriage, welfare, and financial and emotional child support. The project was instituted by the state's Department of Human Resources' Office of Child Support Recovery. It responds to a perceived serious communication problem: that teenage males have little or no knowledge at all about the financial responsibility of parenting. The project also responds to the fact that more than half of Georgia's welfare budget goes to mothers who had their first child as a teenager.**

**The cartoon tabloid features teenagers asking and receiving answers to the following kinds of questions: "Can't I get welfare to help me take care of my baby?" "Yes, but you must help your caseworker identify the father and get him to help pay the child's expenses."**

**"I can't pay child support. I'm in school and I don't have a job." "The state welfare program may help your child and the mother. But you are *building up a debt* with every welfare payment they get—and you will have to pay it back."**

**(By the time I make enough money to pay child support), "How can the state find me, when even I don't know where I'll be living?" "The (state) will find you. *Every* state has an office to locate absent parents."**

**"But suppose I have a lot of bills, car payments, and payments on my stereo?" "Child support must come first. . . . You might have to give up the car or the stereo—or both!"**

**Follow-up survey results in Georgia showed a 94 percent increase in knowledge about this issue among teenage males who read the tabloid. Even teachers, counselors, social workers, and health nurses reported a substantial gain in knowledge among themselves.**

# WORKS CONSULTED

Berlin, Gordon, and Sum, Andrew. 1987. *American Standards of Living, Family Welfare and the Basic Skills Crisis.* Washington, D.C.: National Governors' Association Center for Policy Research. March 1987.

Burt, M.; Kimmich, M.H.; Goldmuntz, J.; and Sonnenstein, F.L. 1984. *Helping Pregnant Adolescents: Outcomes and Costs of Service Delivery:* Washington, D.C.: Urban Institute.

Center for Population Options. 1987. *Estimates of Public Costs for Teenage Childbearing, 1986 Report.* Washington, D.C.: Center for Population Options.

Center for the Study of Social Policy. 1986. *Preventing Teenage Pregnancy: A Literature Review.* Washington, D.C.: Center for the Study of Social Policy.

Children's Defense Fund. 1986. *Maternal and Child Health Data Book.* Washington, D.C.: Children's Defense Fund.

Hamburg, David. 1987. Remarks to a meeting of teenage pregnancy experts and grantees. New York, N.Y.: Carnegie Corporation. February 1987.

Hayes, Cheryl D. 1987. *Risking the Future: Adolescent Sexuality, Pregnancy and Childbearing.* Washington, D.C.: National Academy Press, National Academy of Sciences.

Kimmich, M. 1986. Adolescent Pregnancy and Childbearing: State of the Art and Art in the States: An Issue Brief. Washington, D.C.: National Governors' Association.

Kinard, E.M., and Klerman, L.V. "Teenage Parenting and Child Abuse: Are They Related?" *American Journal of Orthopsychiatry:* 59:3.

Jessor, Richard, and Jessor, S.L. 1977. *Problem Behavior and Psychological Development: A Longitudinal Study of Youth.* New York: Academic Press.

Jessor, R.; Donovan, J.E.; and Costa, S. Forthcoming. *Adolescence to Young Adulthood: Psychosocial Development and Problem Behavior.*

Maza, Penelope L., and Hall, Judy A., 1987. *Study of Homeless Children and Families: Preliminary Findings.* Washington, D.C.: Child Welfare League of America and Travelers Aid International.

Moore, K.A.; Waite, L.J.; Caldwell, S.B.; and Hafferth, S.L. 1978. *The Consequences of Age at First Childbirth:* Educational Attainment, Working Paper 1146-01. Washington, D.C.: Urban Institute.

Pittman, Karen. 1986. "Adolescent Pregnancy: Whose Problem Is It?" Washington, D.C.: Children's Defense Fund.

Rivera-Casole, C.; Klerman, L.V.; and Mandela, R. 1984. "The Relevance of Child Support Enforcement to School-Age Parents." *Child Welfare* 58 521–531.

Schweinhart, L.J., and Weikart, D.P. 1980. *Young Children Grow Up: The Effects of the Perry Preschool Program on Youths Through Age 15.* Ypsilanti, Mich.: High Scope Press.

Southern Corporate Coalition to Improve Maternal and Child Health. 1987. *Boardrooms and Babies: The Critical Connection.* April 1987.

Wirtheimer, Richard F., and Moore, Kristin A. 1982. *Teenage Childbearing: Public Sector Costs.* Final Report. Washington, D.C.: The Urban Institute. December 1982.

# TASK FORCE ON ADULT LITERACY

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At its most elementary level, literacy in the United States is the ability to read, write, and speak with sufficient skill to function successfully in society. These skills are the essential stepping stones to full participation in the economic, political, social, and cultural life of the country. Basic literacy is the key that opens opportunities for additional learning and for upward economic mobility. At a more complex level, literacy includes the ability to reason and process information that enables individual workers to adapt to a rapidly changing and increasingly competitive international marketplace.

For those with the least skill, illiteracy is a significant barrier to self-sufficiency and an obstacle to full assumption of family and civic responsibilities. In its various forms, illiteracy is a serious drain on the nation's economic productivity and competitiveness.

Based on the standard of a century ago—the ability to sign one's own name—virtually all adult Americans are literate. But in today's changing economic and technological environment, this is no longer sufficient. The concept of literacy must now encompass a continuum of skills that extends from the most basic reading skills to significantly more complex communication, analytical, and quantitative skills.

Because literacy is defined in many different ways, estimates of the number of people affected vary widely—from less than 1 percent to almost 15 percent of the adult population. There are other troubling statistics:

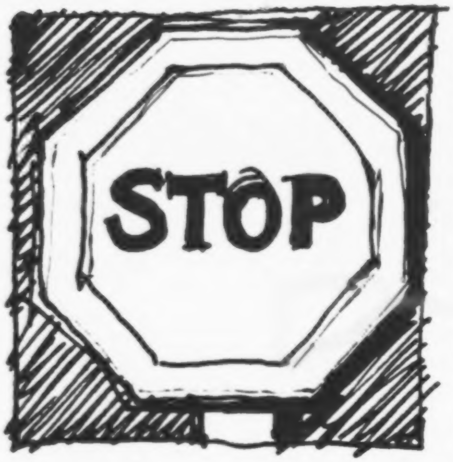
■ One in five adults tested in the 1975 National Adult Performance Level Study could not perform ordinary reading tasks such as ordering a meal from a menu or finding one's way on a street map; based on this finding, it has been projected that 23 million people are functionally illiterate (Irwin 1986, 6).

- Using completion of six or more years of formal education as the definition of literacy, the Census Bureau reported that in 1979, more than 1 million Americans over the age of fourteen, or six-tenths of 1 percent of the population, were illiterate (Irwin 1986, 4).

- A 1986 study conducted by the National Assessment of Educational Progress found that less than 15 percent of the young adults tested could perform complex tasks involving multistep information matching and processing, such as using a street map to follow directions. This study recognized that no single measure of literacy was appropriate because of the multiple skills that literacy comprises. The adequacy of a person's skills is determined in the context of the skills required for a given task. (Jungeblut and Kirsch 1986, and Venezky and Kaestle 1987, 3)

The challenge is to raise literacy skills to sufficient levels to enable all citizens to function productively within an increasingly technologically oriented world. Improving the nation's literacy skills is also an essential component of the Governors' economic development, welfare prevention, and education reform agendas.

***Workplace Demands.*** Today, foreign competition has eliminated or threatened many jobs that have provided adequate incomes for people with poor literacy skills. Workers who were previously able to function adequately in such jobs now find they are unemployable when their jobs are lost to foreign competition or changing technology. Many workers are also unable to benefit from retraining opportunities without first obtaining the requisite literacy skills. Three-fourths of those who will be working at the turn of the century are already in the workforce (National Alliance of Business 1986). This has increased pressure on employers to expand workplace training.



The private sector now spends $210 billion annually on formal and informal training to upgrade worker skills to meet workplace requirements. A 1985 survey of Fortune 1000 companies revealed that basic skills instruction is an important aspect of employee education in about half the companies, and accounts for one-fourth of the courses for which reimbursement is provided (American Society for Training and Development 1985).

Improving literacy skills is also an important part of Governors' efforts to restructure the welfare system and help recipients break out of the web of dependency. State and local experience in operating work and welfare programs has shown that many welfare recipients must overcome literacy deficiencies before they can prepare to enter the job market. A 1987 California study of welfare recipients in the state's Greater Avenues for Independence (GAIN) program found that more than a third of those tested functioned at such a low level of basic literacy and computational competence that, under the GAIN guidelines, they needed to be referred to a remedial education program for six to twelve months as part of their employability development program (CASAS 1987).

> *"The essential element in a climate for learning is hope. Without an atmosphere of hope, no learning takes place. We have fooled ourselves into believing that we could successfully educate children who come from situations which are devoid of structure, aspiration, or control because the generation upon whose care they must rely no longer believes that things will get better, or that help will arrive. Until they do believe, until we rebuild hope in those families and those communities, our most sophisticated strategies for the education of children will not succeed."*
>
> GARRETT MURPHY
> New York Director of Adult
> and Continuing Education

***Increasing the Odds.*** Although educational achievement and literacy do not guarantee self-sufficiency, they do increase the odds. There is a strong relationship between educational achievement and welfare dependency. Achievement of basic literacy skills is closely linked to the number of years of school completed, which in turn determine employability and earnings. Those with higher literacy skills work more hours, earn higher hourly wages, and experience shorter periods of unemployment than their counterparts with weaker literacy skills (Venezky and Kaestle 1987, 37–9).

Strategies that attempt to break the intergenerational nature of illiteracy and reduce the number of dropouts also are likely to have positive results. The overwhelming majority of children born to nineteen- to twenty-three-year-old women are born to those women with the lowest basic skills. Women in the lowest fifth of the skill distribution scale accounted for more than two-thirds of all out-of-wedlock births (Berlin and Sum 1987, 29). Given the importance of the mother's educational level in influencing the educational achievement of her children, the statistics on dropping out of school and teenage parenthood are strong predictors of literacy achievement problems in the future.

Half of all adults in federal and state correctional facilities cannot read or write at all. It has been estimated that only about one-third of those in prison have completed high school. The typical twenty-five-year-old male inmate functions two to three grade levels below the grade level actually completed (Bellorado and Johnson 1986, 2).

***The Self-Perpetuating Cycle.*** The cycle of illiteracy and poverty tends to be self-perpetuating. Low levels of literacy are a barrier to obtaining good jobs that pay high wages and offer opportunities for continuing training and development. As a result, there is a heavy concentration of people with low literacy skills among the poor and those dependent on public financial support. On average, blacks perform 20 percent behind whites on literacy tests and Hispanics perform halfway between the two. It has been estimated that approximately one-third of these differences can be attributed to school attainment, demographics, family background, and literacy practices in the home (Venezky and Kaestle 1987, 37–9).

The high concentration of people with low literacy skills among the disadvantaged has fostered an attitude in which literacy has not been considered a necessary survival skill. Neither the jobs these people hold, nor the communities in which they live, have demanded strong literacy skills. Therefore, literacy skills have not been practiced or even nurtured as valuable tools for fulfilling personal, economic, and social goals. Poor school achievement and dropping out before completing school have been tolerated.

U.S. Secretary of Labor William Brock recently observed: "It was intolerable for this country to live in two societies, one black and one white, and we have tried to address that. Now we have two societies, one literate and one not, and if you are illiterate, it really doesn't matter what your age or sex or religious affiliation is. You cannot be as productive a human being as you would otherwise be."

# ELEMENTS OF A STRATEGY

Specific situations in which people need to apply literacy skills differ for individuals and change over time. The quest for adequate literacy skills thus is likely to be an individualized, life-long process. Multiple strategies and access points to services are needed. The level and type of literacy instruction provided, where and how services are delivered, who is involved, and who will pay for it will depend on the age and circumstances of the individual.

At each stage, no matter what the impetus for improvement or the level at which individuals are functioning, opportunities for improving literacy skills should enhance the individual's self-esteem. For the young mother, this may be through a program to help her become a better teacher for her own children; for an older individual, it may be through a community-based library outreach program; and for someone working in an office, it may be through a course in business English or corporate communications. The important objective at each stage of a person's literacy development should be measurable progress toward achieving skills needed to function as responsible citizens, effective parents, and productive workers.

The elements of a state adult literacy strategy cut across age groups and service delivery systems. They include:

- Prevention strategies that increase achievement of children as they grow up and move through the education system.

- Second chance educational opportunities provided in diverse settings, often outside schools, to enable adults to obtain basic educational skills.

- Work-related education and training that serve as the front line of attack in improving worker skills to meet the changing demands of the workplace.

### *IOWA*

**The Iowa Literacy Council was established in September 1984 by executive order of the Governor. The council uses federal adult basic education funds and seed money from the Job Training Partnership Act administered by the Department of Economic Development. The council was established to assist and advise the Iowa Literacy Program, which was created to enable adults to acquire the skills needed to participate more fully in society. The council helps coordinate the Iowa Literacy Program, serves as a clearinghouse, promotes greater public awareness, and identifies funding sources.**

### *KENTUCKY*

**Kentucky's General Assembly provides funds to each county for literacy programs. The Kentucky Literacy Commission was established in February 1985. Its 1986 projects include: a public awareness campaign; a statewide literacy conference; regional volunteer workshops; a recognition award program; and the Adopt A Literacy Program in which businesses agree to provide a location for literacy programs and $1,000 annually for teaching supplies. Other projects are directed toward recruiting and recognizing literacy volunteers and developing publicity. A tax-exempt, non-profit corporation has been established to receive private donations for adult literacy programs. The commission also issued A Practical Guide for Community-Based Literacy Programs.**

### *UTAH*

**The Governor will be appointing a commission on adult literacy for the purpose of bringing together leaders of education communities, business and the legislature to review current literacy efforts in the state. The commission will make recommendations to the Governor on ways to enhance state support for literacy programs and improve coordination of public and private efforts.**

**ALASKA**

The Division of Libraries in the state Education Department coordinates literacy programs through local libraries and private non-profit groups, adult education providers, and public schools and community colleges. The office offers a Parent and Tots Reading Program in which parents learn to read through peer tutors and then read books to their children in the library. The program aims to help parents learn to read by working with peer tutors in a non-threatening environment, while encouraging parent-child reading as a basis for school readiness.

**INDIANA**

The Indiana Adult Literacy Coalition was initiated in 1983 by the Governor and made an official entity by the Indiana Legislature in [illegible]. The coalition has created a [illegible] plan to seek funding for and coordinate literacy services. Under this plan, the state would undertake literacy [illegible] programs; local coalitions; provide technical assistance, including the development of a program assessment model; develop workshops to train local trainers of volunteers; and develop a literacy clearinghouse using traditional and computerized methods of information dissemination.

**NEVADA**

The Governor's office supports the Nevada Literacy Coalition initiated by the Nevada State Library in February 1987. The coalition has received a [illegible] foundation grant to support state literacy efforts. In addition, the Governor has directed the State Job Training Office to set aside more than $7 million to address dropout and illiteracy problems in Nevada.

**NEW MEXICO**

The New Mexico Coalition for Literacy was initiated by the First Lady's office in conjunction with literacy providers in the state. The coalition's objectives are to organize and coordinate literacy programs statewide and to serve as a catalyst for publicity and awareness. The coalition has $25,000 in funding from JTPA.

> *". . . I was illiterate—you know it is frightening to say. When you wake up in the morning, you have a newspaper—well, you don't know what it says because you can't read. And you have to depend on your friends to tell you what is happening, to read it to you."*
>
> WOODROW RAGLAND
> Missouri

## Prevention is the Best Strategy

A strong educational foundation must begin in early childhood, and be complemented by school-based activities, including early childhood development programs and dropout prevention programs. An important place to break the intergenerational cycle of illiteracy is in the family. It is clear that the family environment makes a significant difference in the value that children place on literacy. Parents who place a high value on reading can encourage children to develop and maintain literacy skills. Parents who read to their children, who discuss issues with them and push them to think, and who model good literacy practices by reading newspapers, magazines, and books are doing their children a great favor.

Unfortunately, many parents do not foster in their children an appreciation for reading and other literacy skills. This is even more apparent among parents who are poor or otherwise disadvantaged. Consequently, many children grow up without adult role models who practice good literacy skills. Illiteracy becomes an intergenerational phenomenon. Targeted efforts should be directed at communities with high concentrations of persons with severe literacy deficiencies and must seek to break the intergenerational pattern.

### *Efforts Across the States*

***Thirty-nine states use competency-based, self-paced systems to deliver individualized instruction. The use of different sites offers open-entry, open-exit programs that provide the organizing framework for remediation and pre-employment activities supported through the Job Training Partnership Act. The Comprehensive Competencies Program, developed by the Remediation and Training Institute, includes computer-assisted academic and functional remediation. This remediation supplements regular classroom instruction in literacy skills, ranging from elementary reading and math to high school and beginning college writing.***

***Begin Early.*** These are essential components of a state literacy program. Last year, the Governors made a series of far-reaching recommendations to strengthen education in *Time For Results: The Governors' 1991 Report on Education* (National Governors' Association 1986). These proposals emphasize early childhood development programs as good investments for improving student achievement. This task force reiterates these recommendations, which are discussed fully in *Time For Results*.

The Task Force on School Dropouts has expanded on the recommendations of *Time for Results* by recommending numerous ways in which young people can achieve higher levels of competence and be encouraged to stay in school. These recommendations are also a critical element of an adult illiteracy prevention strategy. To raise adult literacy levels, dropout prevention strategies need to help young people see the relevance of classroom learning by complementing school-based instruction with applied learning experiences that enable the student to practice lessons in "real world" situations.

The best preparation for those planning to enter the workforce without additional post-high school education is a strong foundation in the basics. School-based secondary vocational education programs, which often are directed heavily at specific occupational skills, should be broadened to include a greater emphasis on literacy instruction. Consistent with this emphasis on basic skills, the success of such programs should be measured more by students' functional literacy achievement than by job placement.

Too often people think of education as something that is provided for children and young people alone. But much of both the formal and informal education that occurs daily in this country is among adults. As international economic competition becomes more intense, adults will need increased opportunities to enhance learning and skills of all types. The United States needs to become a nation of life-long learners. While state governments have been focusing on increasing the learning of children and youth, it is now time to broaden that focus.

## A Second Chance for Adults

Second chance educational opportunities reach out to adults who have dropped out of school and to those who have a diploma but lack the essential skills needed to enter and succeed in the workforce. Adult education and job training programs help to upgrade the skills needed to maintain a competitive workforce.

In developing strategies to meet the needs of adult learners, Governors should recognize that adults differ in their ability to learn and in the level at which they function. Moreover their participation is voluntary and is motivated by the belief that improving skills will solve a specific need or problem. One of the strengths of adult learners is that they come with a reservoir of experience and knowledge gained through life that is a springboard to

## NORTH CAROLINA

The Governor instituted a sixteen-member Commission on Literacy comprised of some of North Carolina's most distinguished government, educational and civic leaders. The commission coordinates ongoing established programs such as the Adult Basic Education Program, the Adult Basic Literacy Educational Program, the Motheread Project, and the Cities in Schools Program.

The free Adult Basic Education Program is directed at adults sixteen or older who have not graduated from high school and function at less than an eighth grade level. This program is conducted through the community and technical college systems.

Provider Services, in operation since 1964, is comprised of many hundreds of volunteers who offer referral and instructional help throughout the state to upgrade basic skills, help achieve a high school diploma, and help students pass the General Educational Development test.

The state is strongly motivated to help students and adults stay in school to learn the fundamentals so they will be able to handle the demands of technologically advanced industries.

In the Governor's State of the State address in February, he designated 1987 as "The Year of the Reader." He challenged all state citizens to join him in achieving a new goal—helping all North Carolinians gain the ability to read.

improved literacy skills. The reality is that many also bring family responsibilities, work obligations, and other problems that may unintentionally conflict with the pursuit of learning. These factors must be recognized and considered. Flexible arrangements are necessary so that services can be provided at times and in places convenient to the learner.

***Flexibility and Diversity.*** The needs and circumstances of the target population for second chance adult education opportunities are diverse, and there is no one program model that is likely to succeed with the entire population. In fact, the most important characteristic of such programs is their diversity and flexibility to tailor services to each student's unique needs and circumstances.

Learning is enhanced when it is pursued as a means to other ends and when it uses a curriculum in which literacy instruction is imbedded in other material. For instance, literacy programs in prisons make sense—especially when tied to job training programs—because prisoners can learn skills useful in earning a living in the outside world.

Greater accountability among the students and providers of adult education is promoted when expectations of student effort and outcomes are clear and frequent feedback on progress is provided. The use of competency-based, rather than time-based, instructional materials also promotes accountability.

Second chance adult education programs are strengthened when instruction is tailored to the different learning styles, functional levels, and goals of students. At times, individual computer-assisted instruction provides the needed flexibility. In addition, such programs can be most successful when they include access to counseling, health, transportation, child care, and other social services. These services often are needed to deal with personal problems that may otherwise hamper learning.

**The Role of Public Education.** The public education system is the primary manager, and often provider, of educational services. These adults' skills may range from being severely deficient in reading, writing, mathematics, and communication in the English language to being ready to obtain a high school diploma through non-traditional means. Instruction is delivered through a pluralistic, adult-oriented delivery system that involves school facilities, community colleges, libraries, community-based organizations, employer establishments, and volunteer literacy programs. In fiscal 1986, 80 percent of the estimated 3.85 million people engaged in literacy activities participated in services being delivered under the umbrella of state adult education programs (U.S. Department of Education 1986).

Despite its broad mandate and innovative ways of reaching out to adults with a variety of needs, the adult education system has remained the stepchild of the educational establishment. It is caught between the public school system, which is oriented toward children, and the postsecondary system, which is oriented toward attaining higher skills. Changing demographics and a highly competitive economy demand that adult education assume its own distinct identity within the education system.

**Expanding Opportunities.** In addition, greater outreach to vast numbers of potential adult learners can be encouraged by expanding the funding base for adult education activities. States might consider following the example of California, Connecticut, Michigan, New Jersey, and New York, which provide state formula aid to school districts based on enrollments in adult education programs.

Other possibilities exist. Funds from a variety of education, employment and training, and social service sources might be redirected to create special alternative programs to help adult learners and, especially, welfare recipients develop better skills and move into employment. In addition, employment and training delivery systems might be offered incentives to devote a greater percentage of their resources to adult literacy activities. For instance, Job Training Partnership Act education and coordination grant funds (the 8 percent set-aside) might be used to provide matching grants to local private industry councils for literacy training as part of the summer youth employment program or other programs serving economically disadvantaged adults or dislocated workers.

### *Enhancing Intergenerational Literacy*

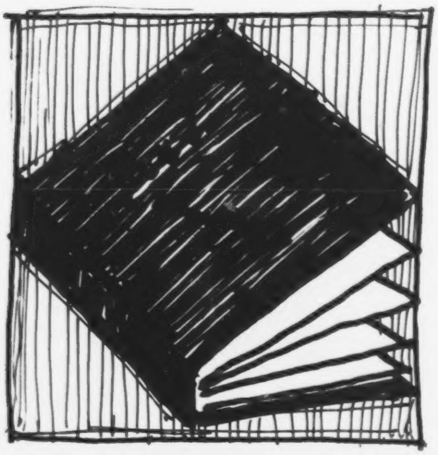
***Some programs reach out to parents and children at the same time. Kentucky's PACE Program blends early childhood education, adult literacy, and parenting education. While children go to a good preschool, mothers and fathers attend small adult education classes to gain basic skills and possibly earn a high school equivalency diploma. Parents can also work with their children in the preschool environment, which helps them learn to teach their children at home. Missouri's Parents as Teachers (PAT) program provides training and support services to help parents enhance their children's intellectual, language, physical, and social development from birth to age three. In addition to information for fostering the child's language, cognitive, social and motor development, the program offers periodic health screenings; visits to homes by parent educators; and group meetings for parents. PAT is available at all Missouri school districts.***

Currently, public sector literacy activities are scattered across state agencies and various local service delivery systems. For the most part, these activities function in isolation from voluntary and private sector literacy initiatives. Improved information sharing and coordination of these efforts can strengthen the fight against illiteracy, and help spot gaps in services.

**Community-based Programs.** Community-based organizations, worksites, and other institutions are a natural home for adult education literacy programs because they have strong bonds with many of the people who need services. Community-based institutions can relate to learners on an individual basis to increase motivation, and can provide the psychological support often needed to help individuals follow through on their commitment to self-improvement.

In addition, volunteer tutoring efforts that allow one-to-one instruction add an important dimension to the local service delivery system. In many areas volunteers have made it possible to expand services that previously could only be provided through public resources.

Nationwide, almost half of those enrolled in adult education programs receive English language instruction. Some of these individuals are illiterate in their own languages as well as in English. The new Immigration Reform and Control Act will put pressure on states, especially those with high concentrations of immigrants, to expand English-as-a-second-language programs. This act requires illegal aliens who are seeking naturalization status and who cannot demonstrate proficiency in English to enroll in English language instruction programs.



## Workplace Literacy

The failure of many individuals to acquire adequate basic skills in school has limited the flexibility of American firms to adapt to changing conditions, has left large segments of the American workforce vulnerable to foreign competition, and has shifted at least part of the financial burden of basic instruction to the private sector. The Center for Public Resources found that 138 of 184 corporations responding to a 1981 survey reported that employee errors in reading, writing, and math had forced their companies to establish basic skills programs. The study's author estimates that the nationwide price tag for such efforts exceeds $10 billion annually (Smith 1986, 11).

For many individuals, inadequate literacy skills cause the most obvious disadvantages in the workplace. But the workplace also offers individuals the highest potential motivation to improve their skills. Some 39 percent of those taking the General Educational Development (GED) examination do so for reasons related to employment (Malizio and Whitney 1981).

***Learning on the Job.*** The most successful job-related education and training takes place either on the job or in programs that are closely linked to the workplace. Most workers learn the skills they need for employment through their jobs. Work-related literacy instruction is provided through employer-supported training primarily at the worksite, or through publicly financed employment and training programs, community colleges, or vocational-technical institutes. Since the objective of such programs is to improve or correct skill levels for the purpose of getting and keeping a job, literacy instruction has a functional orientation. Expected student achievement levels, program goals, and program accountability measures are defined in terms of labor market requirements and employment.

Employment-related literacy requirements are usually subsumed within em-

### *MASSACHUSETTS*

[illegible]

ployability and even specific occupational skill requirements. For instance, employers screen entry-level workers for reliability, good work attitudes, and the ability to follow instructions and learn on the job. In so doing, they usually link literacy skills, especially communication skills and the ability to speak standard English, to desired employability skills.

**GEORGIA**

**The Governor's Task Force on Adult Literacy, which began operation in May 1987, was proposed by the Governor and authorized by the state legislature. The task force's mandate is to determine the demographics of target populations, adopt a definition of illiteracy, survey existing programs, recommend effective delivery mechanisms, and develop a long-range plan of action. The task force receives funding from the Governor's office and JTPA, plus in-kind agency support. In February 1988, the Governor proclaimed the Georgia Literacy Initiative Program Awareness Month. The state provides financial support to numerous literacy initiatives involving volunteer literacy tutors, libraries, community groups, business, and religious and education organizations. In addition, it supports the use of public television to deliver literacy instruction.**

***Employment and Training.*** Employment and training programs that prepare people to enter the workforce and help them obtain the skills to remain employed are important tools for raising literacy levels. For young people and others with little or no labor market experience, employment and training programs often fill the gap between what they learned in school and what they need to know to apply these skills to work.

For more experienced workers, such programs can provide needed literacy and other skills within the context of broader job training and retraining initiatives. These initiatives can be used to promote upward mobility of workers in lower level jobs; to improve productivity among workers; and to help workers make the transition from one job to another, especially when they have become unemployed as a result of structural changes in the labor market.

Strong involvement of the private sector in the governance of local employment and training programs ensures that there are clear standards for the literacy and other skills needed in the workplace. More attention needs to be given to communicating these expectations to potential job seekers and designing services to help those who lack requisite skills obtain them.

***Additional Challenges.*** Despite the magnitude of the private sector training enterprise, some gaps in work-related literacy instruction remain. Much of the training provided is firm-specific and directed at clerical and managerial staff, not at entry-level workers who most often need remediation to advance. Furthermore, workers in small firms may not have regular opportunities for remediation or training through employment.

In addition, many dislocated workers whose primary interest is rapid re-employment lack both high school diplomas and sufficient skills to obtain employment in fields where opportunities exist. These workers need counseling, job search assistance, occupational training, and literacy skills training to be able to adjust to new employment circumstances.

A 1985 study conducted by the American Association for Adult and Continuing Education suggests that closer ties between the private sector and state adult education systems are needed. The study identified thirty-one states in which adult education programs work with companies to provide basic skills training to company employees and others, but concluded that much of this activity is uncoordinated and unevenly distributed throughout the country. Most important, the study found that although many students are workers, employer expectations and workplace demands have not had a substantial influence on the curriculum and design of programs. (Mark and Murphy 1985)

Other information suggests that state policies and practices that deal with student financial aid in postsecondary institutions, educational credit, staffing, contracting procedures, and accountability systems sometimes serve as barriers to public-private partnerships to enhance worker literacy (Duggan 1985).

State initiatives to broaden remediation and training opportunities for all workers, whether they are entering the labor market, employed, or unemployed and seeking re-employment, can contribute to the overall productivity and competitiveness of the state's economy. To date, only a few collaborative public-private models for worker training exist. Given the growing strategic importance of human resource investments to both the public and private sectors, states should consider experimenting with different collaborative models for upgrading the literacy and related skills of the workforce.

> *"The biggest thing that I had a problem with is when I went to other cities and had to use the restroom. One time I walked into the ladies' room and a lady said what are you doing here? And I said I'm sorry."*
>
> WOODROW RAGLAND
> Missouri

## MISSOURI

The Missouri Coalition for Adult Literacy (MCAL) was established in July 1985, with funding from the Department of Education and private resources. MCAL's goals are to [illegible] state and [illegible] Missouri Adult Basic Education, [illegible] Missouri's [illegible] Center for [illegible] on literacy activities in Missouri [illegible].

In [illegible] as Literacy Month in Missouri, the Governor [illegible] a number of new initiatives, including a [illegible] from the Missouri Division of [illegible] and the [illegible] Employment Services, [illegible] an effort to encourage [illegible] and assistance to MCAL in [illegible], to educate the public regarding the problem of illiteracy.

Thirty-two local [illegible] have been established involving the Department of Corrections, [illegible] organizations, businesses, and other groups. The overall [illegible] is coordinated by the University City School District and the [illegible] are responsible for preparing the volunteers.

The Governor's [illegible] Learnfare [illegible] program is a [illegible] designed to [illegible] the educational level and [illegible] job potential of [illegible] persons. The Learnfare program requires [illegible] persons who have not completed high school to register in an adult basic education or GED program, followed by [illegible] in job [illegible] and job search programs. Availability of [illegible] and other support services will be provided under the [illegible] program.

[illegible] In [illegible] 1986, the Missouri Department of Elementary and Secondary Education issued "[illegible] Plan for Literacy [illegible]," which calls for [illegible] the problem of illiteracy through a significant expansion in the GED and adult education system.

[illegible] The Missouri Department of Corrections and Human Resources, [illegible] with the State Department of Elementary and Secondary Education, [illegible] training, [illegible] and a [illegible] program [illegible] in Missouri's correctional system.

## Getting Results

To solve the problem, states should understand the diverse nature of the literacy challenge and create a broad strategy that includes prevention efforts, educational opportunities for adults, and activities oriented to the private sector. In implementing the strategy, the success of any state literacy initiative ultimately depends on the content and quality of services delivered locally. The Governor can guide implementation of the Agenda for State Action and:

- Promote greater clarity of appropriate standards of achievement.
- Hold programs, providers, and institutions accountable for improving student achievement.
- Enhance the productivity of service providers in accomplishing these goals.

*Time for Results* made it clear that Governors are willing to trade some regulatory control over education in return for more accountability among teachers, school administrators, and school districts for the results of education. For Governors, results are most clearly measured in terms of what students know and can do—whether it is in kindergarten, high school, college, or in a vocational education program leading directly to employment. Over the last several years, states have raised their standards, have placed a greater emphasis on student assessment, and have begun to explore the use of various incentive and sanction mechanisms to build greater accountability into the system.

**HAWAII**

The Governor's Council on Literacy was initiated in December 1986, including representatives of the departments of education, social services, labor, aging, and children and youth, and the voluntary and business sectors. Its objectives are to increase interagency coordination and enhance literacy services. The council is examining efforts of other states before developing a [illegible] plan for statewide action.

**FLORIDA**

One of the fastest-growing states in the country, Florida continues to explore new initiatives to combat a growing illiteracy problem caused, in part, by large influxes of new immigrants. In 1986, Florida spent almost $58 million for adult basic education and adult literacy programs are provided by fifty-eight school districts, nine community colleges, five private non-profit organizations, three libraries, two Indian tribes, and various state agencies. The state also has an active Literacy Coalition composed of advocacy groups that represent a wide range of organizations. In addition, the state legislature, at the urging of the Governor, passed legislation this year mandating the state and all local education agencies to develop literacy plans.

***Standards of Achievement.*** Governors have raised the standards for elementary and secondary education in recent years. Expected standards of student achievement for adult education are much less clear, in part because these programs respond to diverse goals. The most consistent standards applied to second chance adult education programs are those used in the GED diploma. The GED tests are used in every state as the basis of awarding a high school equivalency diploma to adults. In 1985, one in seven diplomas awarded in the U.S. was a GED diploma (GED Testing Service 1986). Since its inception in 1942, more than 10 million adults have received GED credentials.

The GED tests and passing score requirements reflect both the content of the current high school curriculum nationwide and the performance of graduating high school seniors. Numerous studies, however, have concluded that, as a group, GED graduates read better than traditional high school graduates. However, test scoring is based on the performance of graduating high school seniors, so some GED graduates and high school graduates alike may function at reading levels as low as the sixth or seventh grade.

Employers have used the high school diploma and the GED as screening devices to certify that graduates have the skills necessary to function in the workplace. Virtually all of the companies responding to a 1985 survey conducted by the American Council on Education indicated that they give the same employment and advancement opportunities to GED holders as traditional diploma holders (GED Testing Service 1986). Critical reading and reasoning skills are being emphasized much more within both the high school curriculum and the revised version of the GED to be released early in 1988. This change undoubtedly will make these credentials more responsive to the needs of employers.

***Certification of Competencies.*** Despite these improvements, it has become evident that neither the traditional high school diploma nor its equivalent are wholly satisfactory employer screening devices for literacy and employment readiness. Neither can a one-time credential, such as the high school diploma and the GED, serve the workers well over their lifetimes.

States may wish to experiment with developing different employment-oriented, competency-based, open-ended certification mechanisms independent of the high school diploma. These mechanisms would permit workers to document their skills over time as workplace requirements change and they improve their skills through additional training. Under such a plan, employer expectations would serve as the benchmark against which worker skills are assessed.

Governors can lay a sound foundation for such a voluntary certification system and other public-private partnerships to better prepare the future workforce and to upgrade the skills of the current workforce. Such a plan can create a better understanding of the actual skill requirements for jobs in a state and a better understanding of skill gaps.

Under the Governor's leadership, a compact between the public and private sectors can be created to ensure that the skills of the American workforce become and remain competitive in the world marketplace. An important aspect of such a compact would be the development of a mechanism for ongoing dialogue between the state's employers and the education and training institutions to identify changing workplace requirements and articulate employer expectations of publicly supported education and training.

# AGENDA FOR STATE ACTION

The Governor's literacy Agenda for State Action is an integral part of the state's investment strategy for the future. States will not make all the progress they can if a significant number of people are not capable of getting in the game. Governors need a full team of skilled workers if our nation is to win the competitive game in which it finds itself.

State strategies should be directed toward preparing every able-bodied person with the skills necessary to compete successfully. The Governor can develop a set of strategies—a "Lineup for Literacy"—that can create a team of productive workers. These strategies should:

- Focus on the needs of adult learners.
- Find ways to enhance literacy training in the workplace.
- Foster cooperation among state agencies, the private sector, and volunteer groups that deal with literacy.
- Further program productivity and accountability.
- Facilitate means by which parents and children can jointly enhance their literacy skills.
- Follow through with existing efforts to reform elementary and secondary education as a way to prevent adult illiteracy.
- Formalize plans to help welfare recipients receive basic literacy skills that will help them find productive employment.

### WYOMING

[illegible]

### ARIZONA

[illegible]

### ARKANSAS

[illegible]

### MISSISSIPPI

[illegible]

## 1

## *Focus on Adult Learners*

- Experiment with ways in which adult education providers can more readily tailor services to meet the needs of worker-learners and employers.

- Streamline and coordinate current efforts so that multiple intervention strategies, agencies, and access points for service can be made available to adult learners.

- Focus attention on adults in various life situations, such as those without high school diplomas, workers interested in upgrading their literacy skills, welfare recipients, dislocated workers, prison inmates, refugees, and recent immigrants.

- Provide technical assistance in adult-oriented teaching practices, program design, and developing competency-based curriculums, and materials.

## 2

## *Enhance Literacy Training in the Workplace*

- Use direct grants to companies to demonstrate the relevance of literacy training for improving worker productivity.

- Promote literacy development as an integral part of on-the-job training.

- Recast the secondary vocational education curriculum to place greater emphasis on the development of basic skills.

## *EDUCATION FOR PRISON INMATES*

[illegible]

[illegible]

[illegible]

[illegible]

## *VIRGINIA*

[illegible]

[illegible]

### *Linking Welfare to Literacy*

***The Greater Avenues to Independence (GAIN) program in California integrates adult schools, Job Training Partnership Act programs, and county welfare departments into a system to assess the literacy and employability skills of unemployed individuals. These individuals are then placed in jobs or in educational upgrading programs. Michigan and other states have begun to link their welfare reform efforts to literacy initiatives.***

## 3

## *Foster Cooperation Among State Agencies, the Private Sector, and Volunteers*

■ Convene a Cabinet Council of department heads who are involved in literacy activities (e.g. education, corrections, social services, labor, commerce, etc.) and direct them to work together to strengthen delivery of literacy services—pooling resources where possible.

■ Use discretionary resources for incentive and demonstration grants to promote greater integration of literacy services in income support, employment and training, housing, health, and other programs serving at-risk populations.

■ Create a forum for joint public and private sector action—such as a statewide literacy coalition.

■ Consider working with businesses to create Literacy Foundations in their states.

■ Conduct formal and informal literacy assessments of the state's population to determine competencies vis-a-vis workplace requirements, using census and other available data.

■ Meet with employers and workers to determine workplace skill requirements and employer expectations regarding the outcomes of publicly suppported education and training efforts.

### *To Enhance the Efforts of Volunteers*

■ Make state resources available to conduct preparatory and in-service training for volunteers.

■ Help develop training materials that can be tailored to meet the needs of adult learners in a variety of settings.

■ Promote cost-effective techniques for service delivery, including television, video technology, and self-paced instructional guides that can be used at home and other locations.

■ Use literacy professionals to support volunteer efforts.

■ Develop systems that provide practical assistance and moral support to volunteers.

## 4

## *Further Program Productivity and Accountability*

■ Strengthen accountability mechanisms that ensure the quality of services provided as a step to guarantee sustained financial support for remediation activities and life-long learning.

■ Rationalize state-imposed criteria used for eligibility determination; planning and reporting requirements; and performance measures by which service providers are held accountable.

■ Provide seed money to develop curriculum materials and methods for integrating literacy instruction in broader training activities.

■ Tap the resources of community colleges and state universities for training and technical assistance to service providers.

■ Draw on the expertise of Job Corps centers and military bases in adult learning approaches and the use of technology for instructional purposes.

■ Promote the use of technology to support the learning process by helping community providers purchase or access already available equipment, developing and sharing software among providers, and teaching instructors to use technology with adult learners.

### *To Increase Accountability in Literacy Programs*

- Set achievable goals for competency for different programs, reflecting the different needs and circumstances of the persons being served.
- Foster greater emphasis on student assessment and monitoring of student progress to achieve identified competency goals.
- Promote greater reliance on competency-based credentials.
- Provide information to learners on labor market requirements, hiring practices, and future trends.
- Require consistent and reliable information on performance to be provided, as a condition of state support.
- Inform consumers about program outcomes and costs.

## 5

## *Facilitate Parent/Child Literacy*

- Emphasize the intergenerational aspects of literacy, and encourage parents to take an active role in developing good literacy skills in their children.
- Solicit the involvement of parents' groups in the assault on illiteracy.
- Incorporate literacy training in state programs that serve children and families that are "at risk." Involve state departments of health, social services, education, and mental health in these efforts.

### *MICHIGAN*

Since the inception of the Michigan Adult Literacy Initiative in January 1984, fifty local literacy councils or coalitions have been formed and the number of adult basic education programs has increased to 121, encompassing 153 school districts. As of February 1987, over 3,700 volunteers had been trained using the Michigan Method for Volunteer Literacy Training, which consists of a tutor handbook and a tutor workshop. A network of libraries, adult education programs, volunteers, business organizations, and the media are used to provide the best service to the student.

### *MINNESOTA*

The Minnesota Adult Literacy Campaign, initiated in October 1985 with foundation support, developed a five-year plan and a Basic Skills Hotline, and is conducting a public awareness campaign and statewide survey of literacy services. The campaign also submitted a report to the Governor and legislature with a series of recommendations that include: increasing funding; making state funding available for child care/transportation reimbursement; using JTPA funding for adult basic education; using program evaluation as a criterion in allocating state-based funding; and providing an adult literacy certification status for teachers that would not require an elementary or secondary teaching license.

## 6 Follow Through With Education Reform

- Speak often about the need to improve elementary and secondary education.

- Require that all children be assessed regularly on their ability to read, write, speak, and think, and require that overall assessment results be made available to the public.

- Provide new education resources in exchange for commitments by educators to get better results.

- Encourage a systematic effort to reduce the number of school dropouts.

- Sponsor efforts to get parents more involved in their children's schools.

## 7 Formalize Plans to Assist Welfare Recipients with Basic Literacy Skills.

- Consider ways to overhaul welfare systems that do not work and attack a root cause of dependency: the lack of those basic literacy skills that serves as a barrier to employment and productivity.

- Propose new guidelines for those receiving public assistance, and require that those who are able must be involved in basic skills and other education programs to enhance their employability.

- Require coordination of efforts by those departments of state government—such as social services, health, labor and job training, and education—that have a direct role in helping people move off the welfare rolls and onto payrolls.

- Enlist the support of the private sector in making entry-level jobs available to those who use their time on public assistance to improve their basic skills and to further their education.

- Assist those persons on welfare—especially mothers and fathers with young children—with support services such as child care and transportation expenses that will enable them to pursue literacy training and other educational opportunities.

The initiatives proposed in this state "Literacy Lineup" are a concrete set of suggestions for gubernatorial action to help people acquire the additional literacy skills they need to join the competitive game of work and productivity. Clearly, there is no single answer to the problem of literacy, because individual needs are different—as are the mix of problems and opportunities in the various states.

Governors must decide which strategies are appropriate, and should tailor their policies and programs to the specific circumstances in their states. But there is one reality that all Governors share: the adult population needs to be equipped with the basic and job training skills necessary to be productive in an increasingly competitive world and to function in society.

The challenge and the opportunity lie ahead. Governors are in a strategic position to exert strong and effective leadership to advance adult literacy in their states.

### PENNSYLVANIA

In fiscal 1986, the state funded a $2 million literacy education grant program to train volunteer tutors. Grantees have included local literacy councils, libraries, community-based organizations, and schools. This program has served an estimated 15,000 adults. The Governor has proposed $5 million in his fiscal 1987 budget to continue and expand this program.

The Governor also has created a task force to review the state job training and education systems and make recommendations on a variety of issues. Recommendations on improving literacy skills is one of the ten areas to be reviewed by the task force.

The First Lady has played an active role in literacy efforts, especially in increasing public awareness and securing support for literacy programs.

### SOUTH CAROLINA

The Governor has launched a statewide literacy effort called Project GOLD (Governor's Outreach for Literacy Development). A Governor's Committee on Literacy was formed in May 1987. This fifteen-member committee was asked by the Governor to study the delivery of literacy services, program accountability, funding and resource allocation, and ways to increase public awareness of the literacy problem. Based on the study, the committee is to develop a strategic plan for statewide action.

In recent years, many states have established statewide coalitions or task forces to both promote and coordinate adult literacy efforts. In most cases, these coalitions have been initiated by the Governor; in some states the initiative has come from the First Lady, the state department of education or library services, or a variety of non-profit or private sector organizations functioning with the support of the Governor.

Such coalitions usually work to: increase public awareness of the adult literacy problem and possible remedies; facilitate coordination of adult literacy services across the state; collect information on the extent of the state's illiteracy problem; mobilize private-public funding for adult literacy; encourage the development of regional and local literacy coalitions and programs; provide a clearinghouse for adult literacy information and technical assistance to local programs; encourage participation of target groups in programs and recruit tutors; and develop a long-range statewide literacy plan.

Most coalitions have developed strong public awareness and outreach campaigns. Such campaigns have included multimedia advertisement campaigns, Governors' and cabinet officials' public speeches or proclamations, an adult literacy month, and local or cable television training series on basic reading skills. More than twenty-five states have toll-free literacy hotlines to refer potential learners and volunteers to appropriate community resources (Contact Literacy Center 1987).

In undertaking a clearinghouse function, coalitions have established literacy resource centers, developed directories of existing state literacy resources, issued newsletters, encouraged the development of local and regional literacy coalition networks, and produced training manuals to help standardize teaching practices.

Thirteen states have won grants from the Gannett Foundation Literacy Challenge effort or received support from private sources such as the MacArthur Foundation. Other states have utilized federal resources such as the Jobs Training Partnership Act, adult education, vocational education, and library assistance funds.

## NEW YORK

**The New York State Adult Basic Skills Program is a coordinated multiagency initiative that uses local, state, and federal funding sources to meet both general and targeted state needs. Special initiatives are tied into economic development activities and targeted to out-of-school youth, welfare recipients, and literacy programs.**

**The initiatives provide services through community-based organizations, employers, volunteers, local education agencies, intermediate education units, postsecondary institutions, and even television stations. For example, twenty local public broadcasting systems collaborated on a television series to help individuals prepare for the state's high school equivalency test. Forty-three segments provide instruction in basic reading, writing, and mathematics. The series was developed by the Kentucky Educational Television Network.**

# WORKS CONSULTED

American Society for Training and Development. 1985. *Employee Educational Assistance: Who Pays, Who Benefits*. Washington, D.C.: American Society for Training and Development. May 1985.

Applebee, Arthur N.; Langer, Judith A.; and Mullis, V.S. 1987. *Learning to be Literate in America: Reading, Writing, and Reasoning*. Princeton, N.J.: Educational Testing Service, National Assessment of Educational Progress. March 1987.

Bellorado, Donna; Johnson, James; Phillips, Kathleen; and Taylor, Sharon. 1986. *Making Literacy Programs Work: A Practical Guide for Correctional Educators, Volume 1*. San Francisco, Calif.: Far West Laboratory for Educational Research and Development for the U.S. Department of Justice, National Institute of Corrections. June 1986.

Berlin, Gordon, and Sum, Andrew. 1987. *American Standards of Living, Family Welfare and the Basic Skills Crisis*. Washington, D.C.: National Governors' Association Center for Policy Research. March 1987.

Chen, Robert H. *Illiteracy As An Economic Development Issue*. Report No. HR-19. Youngstown, Ohio: The Center for Urban Studies.

Comprehensive Adult Student Assessment System (CASAS). 1987. "GAIN: Field Test Report." San Diego, Calif.: San Diego Community College District Foundation.

Contact Literacy Center. 1987. *The 1986 Literacy Hotline Report*. Lincoln, Neb.: Contact Literacy Center.

Duggan, Paula. 1985. *Literacy at Work: Developing Adult Basic Skills for Employment*. Washington, D.C.: Northeast Midwest Institute. The Center for Regional Policy.

Hirsch, E.D., Jr. 1987. *Cultural Literacy: What Every American Needs to Know*. Boston: Houghton, Mifflin.

GED Testing Service. 1986. *Annual Statistical Report*. Princeton, N.J.: American Council on Education.

Hartman, David. 1987. *Illiteracy: A National Dilemma*. New York: Cambridge Book Company.

Irwin, Paul. 1986. *Adult Literacy Issues, Programs, and Options*. Washington, D.C.: Congressional Research Service, The Library of Congress.

Kirsch, Irwin S., and Jungeblut, Ann. *Literacy: Profiles of America's Young Adults*. Princeton, N.J.: Educational Testing Service, National Assessment of Educational Progress.

Malizio, Andrew G., and Whitney, Douglas R. 1981. *Who Takes the GED Tests?* Washington, D.C.: GED Testing Service Studies No. 1, American Council on Education. March 1981.

Mark, Jorie Lester, and Murphy, Garrett. 1985. *Basic Skills—Business—Union Connection*. The American Association for Adult and Continuing Education for the Council of State Directors of Adult Education.

McMichael, Kathryn L. 1987. *An Overview of the Adult Literacy Initiative in America, Volume 1, No. 2*. Washington, D.C.: National Commission for Employment Policy. March 1987.

National Alliance of Business. 1986. *Employment Policies: Looking to the Year 2000*. Washington, D.C.: National Alliance of Business. February 1986.

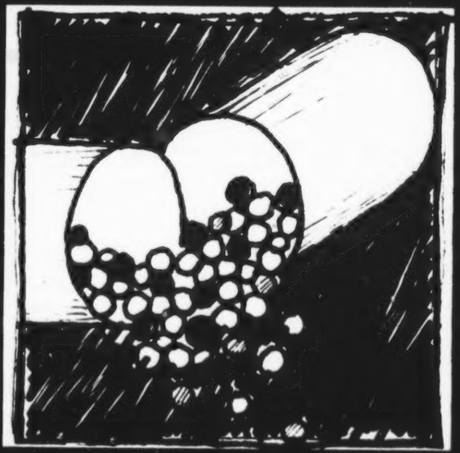
National Association of Counties. 1986. *JTPA Issues: Remediation*, Washington, D.C.: National Association of Counties.

National Governors' Association. 1986. *Time for Results: The Governors' 1991 Report on Education*. Washington, D.C.: National Governors' Association. August 1986.

Smith, Patricia H.; Balian, Lily Ring; Brennan, Sr., Daniel E.; Gorringe, Joyce Lee; Jackson, Mary S.; and Thone, Ruth R. 1986. *Illiteracy in America: Extent, Causes, and Suggested Solutions*. Washington, D.C.: The National Advisory Council on Adult Education Literacy Committee.

Venezky, Richard L., University of Delaware; Kaestle, Carl F., University of Wisconsin; and Sum, Andrew W., Northeastern University. 1987. *The Subtle Danger: Reflections on the Literacy Abilities of America's Young Adults*. Princeton, N.J.: Center for the Assessment of Educational Progress, Educational Testing Service.

U.S. Department of Education 1986. *Fiscal Year 1986 Annual Performance Report*. Washington, D.C.: U.S. Department of Education, Division of Adult Education.



# TASK FORCE ON ALCOHOL AND DRUG ABUSE

# TASK FORCE ON ALCOHOL AND DRUG ABUSE

## *CHAIR*

MARTHA LAYNE COLLINS
*Governor of Kentucky*

■

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The problems of drug and alcohol abuse are problems of shattered lives and wasted opportunities. They are individual in nature, yet public in their effects.

The victims suffer the despair of decline and dependence; some 127,385 die every year (Fein 1984). Their families suffer turmoil and pain. Some cannot hold together under the strain. Others suffer grief at the loss of a son or daughter, a husband or wife, a brother or sister.

The public pays directly in higher health care costs, lost productivity in the economy and in more money for law enforcement; it pays indirectly because drug and alcohol addiction strike at the very heart of society's resilience today and its potential for tomorrow.

The magnitude of these problems of individual suffering and public loss is clear in the numbers. Sixty percent of all illegal drugs produced in the world are consumed in the United States (de Bernardo 1987). A 1986 CBS News poll indicated that about two-thirds of the public viewed drugs as a serious problem in their communities, and in a 1984 Roper opinion poll drugs and crime were ranked as the problems Americans most wanted government to address (Carroll 1985). More than $110 billion is grossed annually from the illegal sale of drugs—more than the total American farmers earn for all crops and more than double the combined profits of all Fortune 500 Companies (de Bernardo 1987).

Nearly 96 million men and women—more than two-thirds of the nation's adult population—use alcoholic beverages. Most have learned to use these beverages without ill effects. However, roughly 10 million people have become problem drinkers or alcoholics (Fein 1984).

Alcoholism affects more than one-third of the nation's families, with devastating effects. Research has shown that:

- Children raised by alcoholic parents are four times more likely to become alcoholics than children from non-alcoholic homes.

■ Thirty-seven percent of children whose parents were alcoholics grew up to become alcoholics and 21 percent of them married alcoholics.

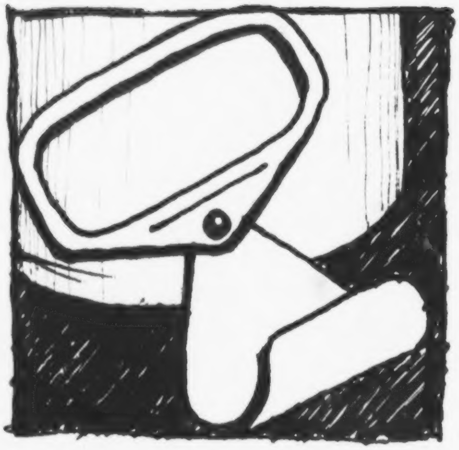
■ Adult children of alcoholics were twice as likely to experience depression or other mental health problems. While the impact on individuals is often tragic, the costs to their unborn children, their families, and to society as a whole are even more staggering. (Fein 1984)

## Impact on Young People

What makes the drug and alcohol problem even more alarming is its effect on young people—the very future of society. Drunken driving is the leading cause of death among those fifteen to twenty-five years of age (National PTA Bulletin 1986). In many schools, drug and alcohol use has reached epidemic proportions. A children's magazine found that one-third of fourth graders it surveyed reported "some" to "a lot" of pressure to drink alcoholic beverages (National Institute on Drug Abuse 1984). And student leaders report that teenage alcohol use is the single biggest problem facing schools (National PTA Bulletin 1986).

Furthermore, 62 percent of American high school seniors try an illicit drug before they finish high school, one in twenty high school seniors smoke marijuana and/or drink alcohol daily, and about 40 percent of these seniors have used illicit drugs other than marijuana (National PTA Bulletin 1986). There is a relationship between drug and alcohol use and the high school dropout problem. In a Philadelphia study, dropouts were almost twice as likely to be frequent drug users as were high school graduates; four in five dropouts used drugs regularly (U.S. Department of Education 1986).

New drugs appear regularly. The so-called "designer drugs," which are made by producing slight changes in the chemical formula for controlled substances, are growing in popularity because they are technically legal to use. "Crack," which is a highly addictive form of smokable cocaine, has recently become one of the most frequently used drugs in many major cities because it is cheap and readily available.



In 1982, almost 10,000 people suffered heroin overdoses and were admitted to emergency rooms in 820 hospitals in metropolitan areas (Graham 1985). There is also a major problem with the misuse of legally prescribed drugs. It has been estimated that in some states the diversion or misuse of prescription drugs constitutes more than half the drug problem.

## The Cost to Society

The tremendous amount of human suffering implied in these statistics is obvious. What is sometimes overlooked is the phenomenal cost of this suffering in dollars and cents. For example:

■ Drug abuse costs American business more than $60 billion a year in lost productivity, increased absenteeism, workplace accidents, rising medical costs, and theft (de Bernardo 1987).

■ Sixty-five percent of those entering the full-time workforce for the first time have used illegal drugs, and about 10 percent of the workforce has alcohol or drug abuse problems, which results in a 25 percent to 50 percent loss in productivity (de Bernardo 1987).

■ Twenty percent of the annual national expenditure for hospital care and 12 percent of the national health expenditures for adults derives directly from alcohol abuse (Fein 1984).

■ Blue Cross of Greater Philadelphia studied 311,000 employees and found that alcohol and other substance abusers used eight times as many hospital days as other workers did (Blue Cross 1981).

## The Governor's Role

***Strong leadership and support from the Governor is a key to the success of any state's drug and alcohol abuse prevention plan of action. The Governor's commitment to working on long-term solutions and concerted action on a variety of fronts is essential.***

***When state agencies, school systems, business and industry, and the law enforcement community can agree on specific strategies to combat the drug abuse problem, the Governor can be the guiding force in reducing this barrier to the nation's individual and collective productivity.***

- Of persons jailed for violent crime, 54 percent admit having been "pretty drunk" or "very drunk" when the crime was committed (Bureau of Justice Statistics, January 1983).

- Of prison inmates interviewed in a Kentucky Corrections Department study, 71 percent admitted drug or alcohol dependency (Carroll 1985).

- Forty-eight percent of all crimes (violent and non-violent) were committed while "under the influence" (Bureau of Justice Statistics, March 1983).

- Fetal alcohol syndrome, a set of birth defects caused by consumption of alcohol during pregnancy, is the third leading known cause of mental retardation, costing at least $800,000 per child over his/her lifetime (National Institute on Drug Abuse 1983).

The drug problem has taken still another serious turn recently with the discovery that acquired immune deficiency syndrome (AIDS) is transmitted through the sharing of needles by intravenous drug users. It has been estimated that approximately 25 percent of the intravenous drug users in New York City carry the AIDS virus (National Institute on Drug Abuse 1987).

The seriousness of the drug and alcohol problem calls for nothing less than a total commitment from all levels of government to develop solutions. The solutions must move beyond providing aid or treatment for those individuals who have already developed alcohol and drug problems. They should focus on prevention strategies and recognize that many alcohol- and drug-related problems besides dependence and addiction require attention. This means that it is necessary to develop a comprehensive strategy designed to:

- Delay the onset of the use of mind-altering substances, since early and heavy involvement is a predictor of later problems.

- Reduce health and situational problems that are directly related to the use of substances, such as drinking and driving, fetal alcohol syndrome, and cirrhosis.

- Increase early detection of alcohol and drug problems at a point when treatment may be less costly and have a higher probability of success.

- Treat and restore the health and social functioning of individuals who are dependent on alcohol and other drugs.

Although drug and alcohol problems may never be totally eliminated, there is much that can be done, and the development of a strategy to tackle the problem is essential.

## COLORADO

The Governor has established a Commission for a Drug Free Colorado program, which will [illegible]

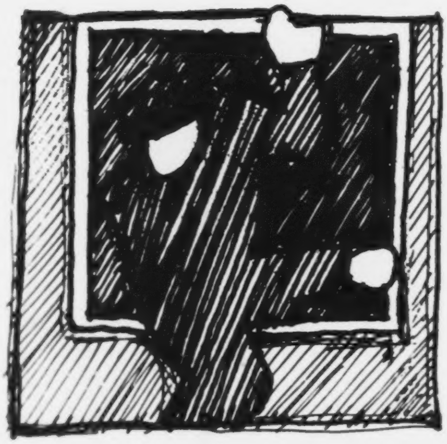
# ELEMENTS OF A STRATEGY

Successful approaches to drug and alcohol problems require commitments to long-term and comprehensive programming. Prevention strategies must be aimed at reducing supply and demand. In order to be truly comprehensive, a state action plan to reduce substance abuse problems should have several characteristics.

First, drug and alcohol programming must reach all sectors of society. Besides programming aimed at the general public, strategies must be tailored to meet the special needs of minorities, women, children, and the elderly. The planning process should identify populations that are at high risk. Planning should recognize that programs that are highly successful with one target population (e.g., teenagers) may not be appropriate for another (e.g., younger children).

Second, all key community groups should be actively involved in both planning and implementation. Every citizen has a role to play and should be encouraged to assume responsibility for his or her part in the solution, whether it be as an employee, employer, parent, friend, religious leader, politician, school administrator, policeman, teacher, judge, or social worker. State plans should encourage widespread citizen involvement.

Any overall strategy should include: public awareness and education, training and professional development, intervention and treatment, and interdiction and law enforcement.



## *KENTUCKY*

Champions Against Drugs is a cooperative effort between the state and local governments, working with the private sector. The Governor has begun a prevention effort of public education and a community mobilization campaign. The public education program uses well-known Kentucky athletes and citizens who speak out against alcohol and drug abuse. At the same time, the program encourages citizen involvement. The program uses a comprehensive four-pronged approach: public awareness; education and training (with a special emphasis on youth leadership training); intervention and treatment; and law enforcement. A statewide council and seventeen regional action groups are working together to develop comprehensive strategies to address alcohol and drug problems at the state, regional, and community levels. Champions has led to the creation of active citizen groups in sixty communities in the state, all supporting programs to prevent the spread of drugs. Fifty "Just Say No" clubs also have been formed to promote drug-free activities and positive peer pressure.

The program has launched a collector card series, featuring sports stars and celebrities, that carries an individual message about substance abuse. Law enforcement officials will use the cards as a way to discuss substance abuse and prevention.

Since Champions began in September 1986, eight major anti-drug rallies have been held in the state and seven more are planned. Sixteen public hearings are also planned statewide by Champions to prepare recommendations and a legislative packet for presentation to lawmakers of the 1988 Kentucky general assembly.

**IOWA**

[illegible]

**NEW JERSEY**

[illegible]

[illegible]

## Public Awareness and Education

Although the terms "awareness" and "education" are often used synonymously, they represent two discrete strategies. Awareness efforts seek to alert the public to the risks associated with drug and alcohol use. Awareness efforts can also teach ways to reduce the risk of drug and alcohol problems, and let the public know about prevention, intervention, and treatment programs.

Education programs generally are more structured, last longer, and attempt to develop skills, increase knowledge, and change attitudes. They often have an ultimate goal of changing behavior.

Research has demonstrated that awareness and education strategies are essential ingredients for prevention. This research has begun to identify some effective prevention strategies.

For example, these programs must:

- Be comprehensive and intensive in nature, begin early and continue through a lifetime, and be targeted to the total community.

- Be aimed at specific attitudes about alcohol and drugs, and at developing general life skills, such as assertiveness, peer resistance, problem-solving, communication, and critical thinking.

- Target all youth and develop specialized strategies for those who are high-risk, e.g., school dropouts and those who have mental health problems or who are economically disadvantaged.

- Integrate prevention activities into family, school, and community life.

Studies are in progress on a number of school curriculums and community education programs. Preliminary results are encouraging, but much more information is needed. A comprehensive state plan should recognize what is known about program effectiveness, seek reliable data on programs that might be implemented, and include provisions to promote and apply continued research.

A comprehensive plan will also recognize that education programs are needed by adults as well as children. Some of the most notable achievements in prevention today are occurring in part as a result of health messages being targeted to the adult population. For example, per capita consumption of alcohol has declined consistently over the past three years. A 1985 Gallup survey found that 14 percent of all adults planned to decrease their drinking within the next year and 2 percent planned to quit altogether. In addition, beverages with a lower alcohol content appear to be gaining in popularity.

A comprehensive plan also recognizes that education programs for all ages can be provided in a variety of settings besides schools, including workplaces, religious institutions, civic organizations, health care facilities, and community centers.

***Alliances for Education.*** State departments of education and alcohol and drug agencies should form alliances with statewide education associations and other groups to encourage and reinforce the development of comprehensive programs for youth in local schools and to advocate a stable funding base that ensures adequate resources are available to local schools and communities.

School boards should be encouraged to develop comprehensive alcohol and drug programs that consist of:

- A policy that clearly articulates the schools' response to possession of alcohol and other drugs by students and staff, which is communicated to the schools and larger community and is consistently enforced.

> ***"I see in my practice and in my recovery meetings each week the unbelievable influence of chemical dependency. To bring it into focus, there are about 300 people in this room. Ten to fifteen percent of you are chemically dependent. That means that thirty to forty-five of you are chemically dependent, you are alcoholics or drug addicts. . . . Each of you will directly influence four other lives. That means that 120 to 180 people will be directly affected as a result of this chemical dependency. Not only will you not be able to work but you won't be able to live. That is a real overwhelming and overpowering realization."***
>
> BURNS BRADY, M.D.
> Kentucky

- An alcohol and drug abuse prevention curriculum that begins in kindergarten and continues through high school, and that is based on research and aimed at behavioral changes. Peer resistance skills training should be an integral component of the curriculum.

- Ongoing alcohol and substance abuse education and training for faculty and staff.

- Education for parents that provides alcohol and drug information and parenting skills.

- Peer education programs and leadership programs.

- Identification, intervention, and referral services for students, faculty, and staff who have alcohol and other drug problems.

- Strategies to educate and involve the larger community such as law enforcement, civic and service organizations, and parent groups in a partnership for prevention. Such programs must be planned and carried out with input from the community and parents through advisory and coordinating bodies.

Colleges and universities should develop comprehensive campus alcohol and drug programs. This can include adopting effective enforcement policies; incorporating alcohol and drug education into the general education curriculum; providing ongoing campus awareness programs; and identifying and referring for treatment students, faculty, and staff who have alcohol and drug problems.

State and local coalitions and agencies should provide substance abuse education programs for adults in a variety of settings, including workplaces, religious institutions, health care facilities, civic organizations, and community centers.

State departments of health and state medical associations should encourage health departments, prenatal clinics, and obstetricians and gynecologists to provide information and education about the risks of alcohol and drug use during pregnancy and lactation.

State government should form a partnership with universities to identify and appropriate funds for research to determine the causes and conditions of substance abuse, as well as the effectiveness of prevention strategies. This partnership should also address the dissemination of these research findings so they can be used by state and local groups.

Television and radio stations and the press should be encouraged to contribute their services toward public awareness efforts. In fact, states may support federal action to require the media to apply an equal time doctrine to alcohol advertising. This would include the airing of health messages, produced by independent health groups, on an equal basis with alcohol advertising. The media can be a powerful ally in awareness and education campaigns.

**State education departments, alcohol and drug agencies, education associations, and other groups should form alliances to develop comprehensive substance abuse programs in local schools. It is also important to advocate a stable funding structure that ensures that adequate resources are available to local schools and communities.**

## Training and Professional Development

Professionals in the human services field often deal with problems that involve drug and alcohol abuse. More often these professionals see only the results of the chemical abuse problem (e.g., child abuse, marital discord, poor health, and failing grades in school) and do not recognize drug and alcohol dependence as the client's primary problem. Professionals, particularly in education, criminal justice, social services, religion, and health, are in key positions to identify and refer citizens who have alcohol and drug problems to education and treatment programs. Training is needed for these key professional groups so they have the information and skills to detect possible substance abuse and to encourage individuals to seek help.

These key groups can be reached through special information brochures on alcohol and drug abuse treatment programs that can be given to clients; drug and alcohol abuse workshops offered during professional meetings and conferences; and by integrating courses on alcohol and drug abuse into preparatory curriculums for these professions.

Professional development is also a critical need within the substance abuse profession. There is a lack of professionals who are qualified in both prevention and treatment. Mental health professionals are regularly called upon to provide counseling for substance abusers. A mental health professional who has not been trained in drug and alcohol abuse treatment may often fail to diagnose the client's substance abuse problem. Drug and alcohol treatment uses special techniques that must be learned if professionals are to work effectively with clients. Prevention professionals must also acquire specialized knowledge and skills. Developing competence in both treatment and prevention is essential to progress in the drug and alcohol abuse field.

Elements that can be included in developing an effective strategy include encouraging state higher education authorities, professional licensure boards, and professional associations to work together to develop preparatory education and continuing education for:

- school administrators, teachers, and counselors;
- law enforcement and criminal justice personnel;
- physicians, nurses, pharmacists, and other health care personnel;
- social workers; and
- clergy and other religious leaders.

Such education should allow for an understanding of alcohol and drug abuse, detection and recognition of substance abusers, referral for treatment, and exposure to effective prevention approaches.

States can also develop formal mechanisms to ensure minimum competence and ethical practices by those who provide alcohol and drug prevention and treatment services. These mechanisms should define and promote a common body of knowledge and skills, develop academic training groups for prevention and treatment professionals, and ensure the quality of services.

State governments should work cooperatively with appropriate statewide associations and organizations to ensure that judges, prosecuting attorneys, and probation, parole, and law enforcement officers receive ongoing training about alcohol and drug abuse and their roles in addressing these problems.

## Intervention and Treatment

Intervention and treatment resources are an integral part of any comprehensive action plan. Prevention education and awareness programs help communities understand the need for drug and alcohol treatment services. Effective prevention programs also give professionals the knowledge and skills to identify clients who have drug and alcohol problems.

Self-help groups such as Alcoholics Anonymous have helped millions of substance abusers. However, they do not provide the total answer. Very often intervention and treatment is needed to prepare the dependent person to accept what a self-help group can offer. Many persons who desperately need treatment are not able to recognize the problem in themselves and will not voluntarily join a self-help group.

Intervention is a process of identifying a person's substance abuse problem, communicating effectively with the individual about the problem, and encouraging the person to enter treatment if necessary. Community settings where drug and alcohol problems tend to surface are ideal locations for intervention. Drug-related problems often present themselves in schools (where students experience school failure or discipline problems resulting from their use of substances), social service agencies (spouse and child abuse), health care facilities (medical problems resulting from abuse), welfare and other benefit agencies (where alcohol and drug problems may contribute to the failure to seek and maintain a job), and in the workplace (where evidence of alcohol and drug problems is seen in absenteeism, increased sick leave and health insurance claims, accidents and decreased productivity). For effective intervention, adequate treatment resources must be available in the community.

At present, most communities do not have a full range of drug and alcohol intervention and treatment services. Clients must often travel great distances or change their place of residence to obtain the services they need. Treatment programs for adolescents and other populations with special needs, e.g., women, minorities, senior citizens, the homeless, are in great demand. Services should include a family resource component, inpatient and outpatient treatment, and long-term residential programs.

***Attention to Funding.*** Attention to funding in this area is essential, and additional commitment of state funds is often needed. In addition, insurance coverage must be sought where it is not currently provided. Both private insurance and Medicaid reimbursements are appropriate funding sources. Studies show that treatment is cost-effective. Drug and alcohol abusers who have not received treat-

***Drug abuse costs American business more than $60 billion a year in lost productivity, increased absenteeism, workplace accidents, rising medical costs, and theft.***

***Sixty-five percent of those entering the full-time workforce for the first time have used illegal drugs, and about 10 percent of the workforce has alcohol or drug abuse problems, which results in a 25 percent to 50 percent loss in productivity.***

***A comprehensive state plan should recognize what is known about program effectiveness, seek reliable data on programs that might be implemented, and include provisions to promote and apply continued research.***

### ARKANSAS

[illegible]

*Many communities have discovered that a partnership between schools, treatment centers, parents, social workers, and criminal justice professionals has been a particularly effective way to identify and refer individuals. Stepped-up enforcement of laws and penalties for drunk driving for example, have resulted in increased referrals to alcohol abuse education programs.*

ment drive up insurance costs by seeking treatment for other ailments caused by their substance abuse.

In allocating resources, it is important to keep in mind the tremendous costs of drug and alcohol abuse. Mechanisms to identify those who are abusing, to intervene, and to provide effective treatment have great potential for reducing the total costs to society.

Employee assistance programs in the workplace or student assistance programs in schools and colleges are examples of early intervention programs that can save millions of dollars. These programs are cost-effective because employee or student "downtime" is reduced, health care costs are controlled, and highly trained employees or very bright students are retained. For example, in 1984 an employee assistance program jointly administered by AT&T and the Communication Workers of America cost the company $1.3 million, but saved the company $3.3 million (de Bernardo 1987). The Commonwealth of Pennsylvania also has a program to help state employees with their substance abuse problems.

If proper resources are invested in prevention and early intervention, the payoff could be increased tax revenues, greater productivity, and a healthier citizenry.

A successful strategy to prevent drug and alcohol abuse must include a variety of elements.

***Cooperation in Government.*** State executive and legislative branches of government should work cooperatively to allocate adequate resources for the treatment and rehabilitation of drug- and alcohol-dependent citizens.

Special attention must be given to populations in greatest need and those who traditionally have been underserved. An adequate range of specialized treatment services needs to be available and accessible to adolescents. This should include inpatient and residential services, family counseling, and outpatient transition care and aftercare to support recovery.

Attention also should be given to individuals in shelters for the homeless, since experience suggests that they have significant alcohol and drug problems.

States should explore the possibility of changing laws that provide and regulate private and public health insurance to ensure that adequate and reasonable coverage for the treatment of alcohol and other drug problems is available. Laws may be formulated to facilitate coverage for treatment in the most cost-effective and appropriate setting, whether it be free-standing or hospital-based, inpatient or outpatient, public or private.

States should also explore alternative funding strategies, including Medicaid, to provide the most cost-effective coverage for treating alcohol and drug-dependent adolescents and adults in an appropriate and efficient setting to meet individual needs.

***Agency Outreach.*** Policies and procedures of existing health and social service delivery systems should be reviewed to determine their potential for identifying and referring clients for treatment of alcohol and drug problems.

Staff who interview clients for unemployment compensation, AFDC, or other benefits should be trained to detect possible drug and alcohol abusers and to refer them to treatment. Staff in public health clinics, particularly those offering prenatal services, should be trained as well.

Agencies that provide child abuse and neglect services should screen for parental alcohol and drug abuse and develop a family service plan that includes treatment.

***Business Cooperation.*** State departments of commerce and labor and labor management groups should promote and support the efforts of business and industry to develop employee assistance programs that identify and refer troubled employees for treatment. States may wish to explore tax incentives for businesses that implement such programs.

***Criminal Justice Response.*** States should conduct a thorough review of the criminal justice system's response to alcohol and drug abuse to determine the adequacy of diversion and treatment options. Based on the findings, states may consider the following steps to increase their potential to provide treatment for individuals who have alcohol and drug problems.

Any individual who is detained for a criminal offense pending trial should be screened for alcohol and drug problems and referred to appropriate treatment. States should develop adequate alcohol and drug treatment programs for convicted felons. Treatment programs should be available to the offender within the correctional institution before the individual returns to the community. Participation in a community-based treatment program may be made a condition of probation. Such treatment can substantially reduce the number of repeat offenses for those crimes directly related to alcohol and/or drug dependence.

Judges should require parents suspected of child abuse or neglect or other domestic violence to be assessed for drug and alcohol problems. When a drug or alcohol problem is found, treatment could be required.

Criminal justice services and other juvenile service providers should work cooperatively to identify, intervene, and provide appropriate education, treatment, and follow-up for all youth identified through the courts as having alcohol and drug problems.

## Interdiction and Law Enforcement

Effective law enforcement is an important influence in both the supply and the demand for drugs. Drug dealers participate in an illegal business that uses many of the same techniques of legitimate businesses. The streets are the marketplace and all individuals are potential customers.

In attempts to control drug sales in neighborhoods around the nation, law enforcement officials rely on several tools: sentencing, forfeiture of assets, electronic surveillance, witness immunity and protection, and reviewing currency transaction reports and state revenue files. Any efforts to strengthen and facilitate the use of these tools will enhance law enforcement efforts. Some 708,400 suspects were arrested on drug charges in 1984 (de Bernardo 1987).

One of the major law enforcement problems is trying to get a handle on the amount of drugs entering the United States. Approximately 12 tons of heroin, 65 tons of marijuana, and 150 tons of cocaine entered the United States in 1986 (de Bernardo 1987). Preventing drugs from entering the country is a federal responsibility. The nation's borders must be patrolled for all types of contraband, most of all drugs.

> ***"Amy ran our family when she was addicted to drugs . . . My father died from cancer—it took two years for him to die and it was a very painful thing for me but it wasn't nearly as bad as watching my daughter die spiritually."***
>
> **LOUIS FREEMAN**
> Ohio

States should cooperate and assist the federal government whenever possible with interdiction. A unified effort of enforcement is necessary to help the federal government carry out its responsibility.

***Identifying Offenders.*** In addition to interdicting the supply of drugs and punishing drug offenders, the criminal justice system can also identify and help offenders who need drug and alcohol treatment. Judges, attorneys, parole officers, and police are in key positions to identify both youth and adult offenders who have drug and alcohol problems.

One national program available in many communities is aimed at treating criminal offenders who are substance abusers. Treatment Alternative to Street Crime (TASC) is funded through the U.S. Department of Justice with state and local matching funds. This program attempts to bring together the justice system, with its legal sanctions that reflect concerns for public safety and punishment, and the treatment community, with its emphasis on therapeutic relationships that change the individual behavior of substance abusers. Under TASC, community-based treatment is made available to drug-dependent individuals who would otherwise burden the community and the justice system with their criminal activities.

Many communities across the nation have discovered that a partnership between schools, treatment centers, parents, social workers, and criminal justice professionals has been a particularly effective way to identify and refer individuals. Stepped-up enforcement of laws and penalties for drunk driving for example, have resulted in increased referrals to alcohol abuse education programs, which in turn has helped identify drug and alcohol problems in many offenders.

Attention also must be paid to the problem of substance abusers in state prison systems. A recent study completed by the Kentucky Department of Corrections shows that 71 percent of prison inmates identified themselves as alcohol- or drug-dependent (Carroll 1985). Programs to rehabilitate these offenders before they are released and provide appropriate follow-up afterward have the potential to greatly reduce recidivism.

Enforcement of the minimum drinking age is another area where law enforcement efforts are critical. Public support for strict enforcement is growing. Parents are gaining greater appreciation of the rationale behind this law: drunk driving is the leading cause of death among young people, and raising the drinking age has been correlated with a reduction in these fatalities. Public education about other correlates of youthful drinking (vandalism, teenage pregnancy, other drug abuse, school failure) has also increased support for effective enforcement efforts.

*The seriousness of the drug and alcohol problem calls for nothing less than a total commitment from all levels of government to develop solutions.*

*Prevention strategies must be aimed at reducing supply and demand.*

*Drunk driving is the leading cause of death among fifteen- to twenty-five-year-olds.*

***Enforcing Laws, Stopping Supplies.*** An effective state strategy to enforce drug laws and stop the drug supply should include several elements. A 1985 report on State Laws and Procedures Affecting Drug Trafficking Control by the National Criminal Justice Association and the National Governors' Association calls for:

- Greater coordination among law enforcement agencies at all levels of government.
- More aggressive investigation and prosecution of drug traffickers.
- Greater resource commitments to drug law enforcement initiatives.
- Greater uniformity among state laws affecting the nature and extent of enforcement activities, prosecutorial procedures, and penalities imposed on individuals convicted of violating applicable laws.

Governors should commission law enforcement task forces to study ways to improve the legal tools available for interdiction and prosecution.

States should adopt policies and procedures that control the diversion of prescription drugs through a centralized reporting system.

Laws setting the minimum drinking age should be aggressively and consistently enforced, especially at events where underage drinking is most likely to occur, such as rock concerts, sporting events, and establishments that cater to a younger adult or mixed-age clientele.

States also can pass legislation authorizing the courts to suspend or revoke the driver's license of persons convicted of committing a traffic violation while under the influence of alcohol and other drugs. Reinstatement or return of license should depend on the offender being screened for alcohol and/or drug problems and successfully completing treatment.

Legislation might be considered to establish the civil liability of individuals who negligently sell or serve alcoholic beverages to persons under the legal age, or those who are visibly intoxicated and, as a result, injure themselves or another.

States also may evaluate the role of alcoholic beverage control authorities to ensure that protection of public health and safety is their primary concern.

### MISSOURI

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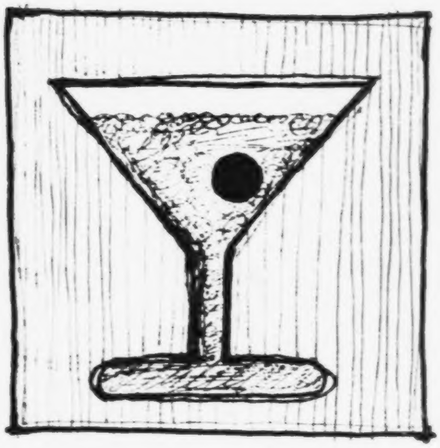

Any state can win the war against drug and alcohol abuse with a serious commitment to a comprehensive plan and strong leadership from its Governor. Any plan should include the elements of prevention and education, training and professional development, intervention and treatment, and interdiction and law enforcement. The plan must also be realistic and allow all groups to work together.

Strong leadership and support from the Governor is a key to the success of any Agenda for State Action. The Governor's commitment to long-term solutions and concerted action on a variety of fronts is essential.

But where can a state begin? How can a state find a workable solution to the substance abuse problem? Many programs are already in place, but if more attention needs to be focused there are some basic steps that can be taken to succeed in the war against drug and alcohol abuse.

## 1

## *Lay the Ground Work*

- Designate a clearinghouse for the information, such as a task force, that will report to the Governor on the nature of the problem and development of the strategy.

- Develop a centralized system to collect data about drug and alcohol problems in the state in order to determine target population and what elements should be in any comprehensive strategy.

- Collect statistics on drug-related arrests, accidents, deaths, school dropouts, suspensions and expulsions. Insurance claims, hospital admissions, and worker compensation claims should be available to begin planning.

- Review current programs in the public and private sector to understand current prevention efforts and to determine what areas need help or attention.

- Identify the impact of drug and alcohol abuse on the private sector, schools, and other areas, and determine potential savings of prevention programs.

- Locate every agency of state government that deals directly with drug and alcohol abuse and review the ability of each to carry out program responsibilities.

- Report all findings to the Governor to begin effective programs.

## 2

## *Find a Program That Works*

- Begin planning a comprehensive strategy that includes the elements discussed in this report. Any strategy must focus on prevention and education as a way to get a handle on the abuse problem. Programs must be developed for all age groups, and must involve students, parents, teachers, business leaders, clergy, and law enforcement.

- Provide training and professional development for those involved in the problems of abuse. Training must sharpen the ability of teachers, judges, social workers, and others to spot problems early; explore the various causes of abuse; discuss appropriate treatment for different age groups and varying causes of the problem.

- Enlist the media to assist in education and prevention programs.

- Identify those who need help through intervention and treatment. Social service agencies must be more agressive in identifying problems related to abuse; the criminal justice system should try to identify those who require treatment; school systems should also be aware of those who have abuse problems.

- Involve law enforcement agencies. Efforts to control the supply and demand of substance that are abused should be supported. Laws relating to drunk driving, sale of alcohol to minors, and illegal drug sales must be strictly carried out.

- Encourage the federal government to continue cracking down on illegal drug sales and smuggling.

- Dedicate more resources to enforcement procedures.

## 3

## *Find Funding for the Plan*

- Determine funding needs and priorities for the strategic prevention plan and consider funding sources.

- Identify current expenditures for ongoing programs at the local, state, and federal level.

- Explore new funding sources within state government for any new programs.

- Seek support from the general assembly, businesses, and communities.

## 4

## *Rally Support for the Plan*

- Act as the key supporter for the comprehensive prevention strategy. The Governor should be a central figure for mobilizing community and state government cooperation.

- Encourage state agencies to work together and cooperate in areas of prevention and treatment in addressing the abuse problem.

- Rally local communities to get involved statewide to carry out an effective strategy.

- Work with and find support in the business community by stressing what an abuse-free workplace can mean to industry.

The Governor should convey the strong message that drug and alcohol prevention can be accomplished. When state agencies, local communities, business and industry, and law enforcement come together on a specific strategy for development, the Governor can be the guiding force in reducing this barrier to the nation's individual and collective productivity.

### *Youth Programs Reach Out*

***Boy Scout Councils throughout Kentucky are "Saying No to Drugs" through their national program, Drugs: A Deadly Game. This educational program includes a video, teacher's guide, and printed materials that could reach 86,000 scouts. These materials are also available to schools and other organizations.***

***The Northern Kentucky Division of the Cincinnati Community Chest has adopted "Project Charlie," a substance abuse prevention program for elementary school children. The emphasis is on early education and the development of positive behavior choices.***

***In several Kentucky counties, 4-H Councils are working with the schools on drug abuse. Franklin County has 1,500 participants in a "Be Smart, Don't Start" program for eight- to twelve-year-olds. In Graves County, 400 children have participated in their local 4-H program.***

***Boys Clubs of America's "DRUG FREE and Proud to Be!" program was adopted in Louisville, Ky., and more than 6,000 commitments have been obtained from youth who promise to stay drug free. Peer pressure to stay away from drugs is a key element.***

***In Kentucky, the Buddy and Teen Buddy program is an outgrowth of Boys Clubs of America's "Youth Helping Youth" program. This program targets inner-city youth. Building self-esteem and positive behavioral patterns are the main objectives. The program works with the local community mental health center.***

Many states and Governors have already realized the seriousness of substance abuse and its effects on the general population, and as a result they have begun to implement programs and initiatives to deal with the problem.

Several programs began with federal funds to support mental health and substance abuse initiatives. However, numerous states have taken the lead in dealing with the problem.

There are common characteristics that run through many state programs which have already been discussed. The main components of these programs are public awareness, education, and community involvement. In many cases, all segments of the population are called upon to get involved with the comprehensive plan.

The task force recently surveyed the states for new programs in alcohol and drug abuse prevention. Governors were in the forefront of many of these efforts; only a few are highlighted in this report. A complete summary of all state programs can be found in the Supporting Works for this report.

## NORTH CAROLINA

**The Governor's Council on Alcohol and Drug Abuse Among Children and Youth was established to create a new awareness of the problem in the state. The council is charged with reviewing the problem and making recommendations to the Governor on youth substance abuse issues. It assesses mechanisms for coordinating state and local resources; conducts public hearings; promotes local boards, councils, or commissions to identify model prevention, intervention, and treatment efforts for possible statewide replication; and conducts public awareness activities.**

**The Governor challenged every local community to form a local task force or coalition on substance abuse. A statewide conference will be held in the fall of 1987 for local officials, law enforcement personnel, business owners, education officials, health organizations and civic leaders to come together to share information and build a solid foundation for addressing the drug problem. At the forum, a booklet on state resource programs will be released that will contain information on every anti-drug effort at the state level.**

## MASSACHUSETTS

**The Governor's Alliance Against Drugs, created in December 1984, is a coordinated statewide effort to mobilize communities to implement drug and alcohol abuse prevention programs with a goal of drug-free schools by 1990.**

**The nationally acclaimed program, which began with eighteen communities and has grown to nearly 300, requires each community to form school-community advisory councils made up of education and political leaders, law enforcement agencies, and the business community. The councils help local school districts implement drug and alcohol prevention curriculums from kindergarten through twelfth grade; review and update school discipline codes; develop written agreements between school and police officials on procedures dealing with drug use and sale in and around schools; implement peer and parent education programs; and provide access to community treatment resources for youngsters with substance abuse problems.**

# WORKS CONSULTED

Blue Cross of Greater Philadelphia. 1981. *Joint Health Cost Containment Program Utilization Report.* Philadelphia, Pa.

Bureau of Justice Statistics. January 1983. *Prisoners and Alcohol.* Washington, D.C.: U.S. Department of Justice.

Bureau of Justice Statistics. March 1983. *Prisoners and Drugs.* Washington, D.C.: U.S. Department of Justice.

Carroll, J.M. 1985. *The Commonwealth at Risk: A Report by the Governor's Task Force on Drug and Alcohol Abuse Prevention.* Frankfort, Kentucky.

CBS News Poll. 1986. Drugs In America. New York.

Cook, P.J. 1984. "The Economics of Alcohol Consumption and Abuse." *Alcoholism and Related Problems.* 56–77. Englewood Cliffs, N.J.: Prentice-Hall.

de Bernardo, M.A. 1987. *Drug Abuse In the Workplace: An Employer's Guide for Prevention.* Washington, D.C.: U.S. Chamber of Commerce.

Fein, R. 1984. *Alcohol in America: The Price We Pay.* Newport Beach, Calif.: Care Institute.

Gallup Poll. 1985. Cited in *The Commonwealth at Risk: A Report by the Governor's Task Force on Drug and Alcohol Abuse Prevention.* Frankfort, Kentucky.

Graham, Robert. 1985. Testimony on Drug Trafficking and Border Interdiction. Washington, D.C.: U.S. Congress. House Judiciary Committee. Subcommittee on Crime.

National Association of State Alcohol and Drug Abuse Directors. 1984. *Alcohol and Drug Problem Costs, Programs and Services.* Washington, D.C.: National Association of State Alcohol and Drug Abuse Directors.

National Criminal Justice Association and the National Governors' Association. 1985. *State Laws and Procedures Affecting Drug Trafficking Control: A National Overview.* Washington, D.C.: National Criminal Justice Association.

National Institute on Alcohol Abuse and Alcoholism. 1981. *Fourth Special Report to the U.S. Congress on Alcohol and Health.* Rockville, Md.: Alcohol, Drug Abuse and Mental Health Administration.

National Institute on Alcohol Abuse and Alcoholism. 1983. *National Drug and Alcoholism Treatment Utilization Survey: Comprehensive Report.* Rockville, Md.: U.S. Alcohol, Drug Abuse, and Mental Health Administration.

National Institute on Drug Abuse. 1983. *Alcohol and Health.* Rockville, Md.: U.S. Alcohol, Drug Abuse, and Mental Health Administration.

National Institute on Drug Abuse. 1984. *Use of Licit and Illicit Drugs by America's High School Students 1975–1984.* Washington, D.C.

National Institute on Drug Abuse. 1985. *Drug Use Among American High School Students, College Students, and Other Young Adults.* Rockville, Md.: U.S. Alcohol, Drug Abuse and Mental Health Administration.

National Institute on Drug Abuse. 1987. Technical Review Meeting on Needle Sharing Among Intravenous Drug Abusers: National and International Perspectives. Rockville, Md.: U.S. Alcohol, Drug Abuse and Mental Health Administration.

National PTA Bulletin. 1986. Drug and Alcohol Awareness Week. Chicago, Ill.: Parent Teacher Association.

U.S. Department of Education. 1986. *Schools Without Drugs.* Washington, D.C.: U.S. Department of Education.

West, L.J. 1984. *Alcoholism and Related Problems.* Englewood Cliffs, N.J.: Prentice-Hall.

# THE FEDERAL-STATE PARTNERSHIP

Working together, states and localities can take major steps toward developing an investment strategy to bring down the barriers to individual self-sufficiency. However, the role of the federal government as a partner in this effort cannot be overlooked. Existing federal grant programs can help states provide some of the flexible resources needed to meet The 5 Percent Challenge (see Setting the Stage). The federal government must also be encouraged to refocus federal resources now devoted to treatment and maintenance on coordinated prevention strategies. Increased flexibility in federal programs can help states and localities design and implement a strategy to reduce social barriers, and intergovernmental cooperation is essential in resource allocation, eligibility and targeting, administrative arrangements, and reporting.

# UTILIZATION OF FEDERAL RESOURCES

A variety of federal resources can be used by states and localities to help underwrite the investment strategy. While not a comprehensive catalog of federal programs, the matrix that follows provides an example of the kind of analysis that may be useful as states begin to develop agendas for state action. Programs in the matrix that begins on page 116 were identified by the five task forces as cutting across a number of the different barriers or as being important to prevention efforts.

The matrix points out some important weaknesses in the availability and quality of data available from national data bases. However, more detailed information probably can be obtained at the state level. The lack of national information should not, therefore, deter states from developing a similar matrix to illustrate available resources. Only by assessing available resources and identifying opportunities or constraints attached to them, can a coherent prevention strategy be organized.

The major federal programs presented in the matrix can be used in a variety of ways to help states and communities reduce the incidence and consequences of teenage pregnancy and substance abuse, improve high school completion rates and literacy skills, and prevent long-term welfare dependency. This is not to say it will be easy. Many of these programs serve other priority groups as well and competition for scarce federal resources is frequently strong. In some instances, decision makers will be caught in the seemingly intractable dilemma of whether to allocate funds for treatment or focus these resources on prevention. In this highly competitive environment a strong, persuasive prevention focus and knowledgeable state staff are needed to effectively manage available federal resources and to overcome inherent structural barriers and burdensome administrative procedures. How can states and communities use federal programs to help bring down the barriers? Some suggestions follow.

## Resource Opportunities for States

***Adult Education Act.*** The adult education program can be used as a complement to other federal resources. For example, the adult education programs can be linked to: develop literacy programs for parents of Head Start children in day care facilities; provide basic skill programs to targeted populations such as recipients of Aid to Families with Dependent Children (AFDC); provide basic skill remediation for participants in Job Training Partnership Act (JTPA) programs; use volunteers and community-based organizations to assist adult learners with poor basic skills; and provide workplace basic skill improvement to vocational education program trainees or JTPA enrollees.

A few states, though, may have created an unnecessary impediment to the use of these funds by requiring that adult education services be provided only through local school districts. This restriction may prevent the use of adult education funds as part of a welfare-to-work program or one that emphasizes training in the workplace.

In developing prevention strategies that will integrate adult education resources, states may want to expand the use of adult education outside the school district and to set standards for program performance and accountability. These standards would ensure that program participants develop the skills needed for the workplace and link participants' achievements to employment and training-related activities.

***Head Start Act.*** Head Start programs provide comprehensive services to disadvantaged preschool children and their families through local community-based organizations. Such programs can be linked to adult education funds as described above or to other early childhood education efforts. Head Start programs can also draw on a variety of health and nutrition programs.

***Job Training Partnership Act.*** The Job Training Partnership Act (JTPA) is the major source of training funds for the economically disadvantaged. Its purpose is "to establish programs to prepare youth and unskilled adults for entry into the labor force and to afford job training to those economically disadvantaged individuals and other individuals facing serious barriers to employment, who are in special need of such training to obtain productive employment."

Congress recognized the importance of an investment strategy for JTPA as it outlined the performance standards for the program: "It is essential that criteria for measuring the return on this investment be developed, and the basic return on the investment is to be measured by the increased employment and earnings of participants and the reductions in welfare dependency."

Locally constituted private industry councils decide, within the parameters of the law, who will be served, what services will be provided, and who will deliver the services, under the policy guidance and oversight of the Governor. The Governor's planning and coordination responsibilities can be used to foster cooperation between the education community and the local JTPA delivery system. Additionally, through the use of the state set-asides and the management of the performance standards system, substantial influence can be exerted over the entire employment and training enterprise.

# MATRIX OF FEDERAL PROGRAMS THAT CAN BE USED IN PREVENTION EFFORTS

| ***PROGRAM*** | ***FISCAL 1986 FUNDING*** ***(Post-Sequester Appropriations) $ in Millions*** | ***INFANTS*** ***Under One Year*** | ***THE VERY YOUNG*** ***Ages One to Five*** |
|---|---|---|---|
| 1. Education Consolidation and Improvement Act | | | |
| Chapter 1 | 3,529.57 | N/A | 365,250 *(3–5)* |
| Chapter 2 | 478.50 | N/A | N/A |
| 2. Education of the Handicapped Act | 1,191.99 | See note. | 260,931 *(3–5)* |
| 3. Adult Education Act | 97.58 | | |
| 4. Carl D. Perkins Vocation Education Act | 802.75 | Unknown | Unknown |
| 5. Head Start Act | 1,040.10 | | 440,000 |
| 6. Job Training Partnership Act | | | |
| Title II-A | 1,783.09 | N/A | N/A |
| Title II-B | 635.98 | N/A | N/A |
| Title III | 93.70 | N/A | N/A |
| 7. Work Incentive Program/WIN Demonstration Program | 202.88 | | |
| 8. Community Service Block Grant | 320.60 | Unknown | Unknown |
| 9. Aid to Families with Dependent Children | 8,896.73 | 1,053,255 *(under 2)* | 1,999,035 *(2–5)* |
| 10. Medicaid | 23,898 | | |
| Children Under 21 | | | 4,396,078 *(under 6)* |
| EPSDT | | | 1,208,600 *(under 6)* |
| Services for AFDC-Related Adults | | | |

*This matrix attempts to illustrate a variety of federal programs that can be used to serve different populations as part of state and community prevention efforts. Where existing data bases providing demographic information on populations served under these programs do not mesh perfectly with age classifications used in the matrix, specific age information is provided in parentheses.*

| ***THE BEGINNING YEARS*** *Ages Six to Ten* | ***THE MIDDLE YEARS*** *Ages Eleven to Fourteen* | ***ADOLESCENTS*** *Ages Fifteen to Seventeen* | ***ADULTS*** *Ages Eighteen or Older* | ***NOTES*** |
|---|---|---|---|---|
| | | | | Data for School Year 1984–85. |
| 2,938,886 | 1,357,790 | 256,643 | N/A | |
| N/A | N/A | N/A | N/A | |
| 1,966,104 *(6–11)* | 1,697,393 *(12–17)* | | 196,676 *(to 21)* | Data for school year 1985–86. Grants for children *(ages 0–2)* and families authorized in fiscal 1987 at $50 million. |
| | | 2,900,000 *(16 & older)* | | Fiscal 1985 data. |
| Unknown | Unknown | Unknown | | |
| | | | | Fiscal 1984 data. Almost all children are between the ages of three and five. |
| N/A | 13,570 *(14–15)* | 364,160 *(16–19)* | 699,215 *(20 & over)* | Enrollee estimates for period July 1, 1985 to June 30, 1986 and summer of 1986. |
| N/A | 252,864 *(14–15)* | 297,487 *(16–19)* | 193,367 *(18 & over)* | |
| N/A | N/A | N/A | 221,207 *(55 & over)* | |
| | | | 120,000 *(under 22)*<br>780,000 *(22–44)*<br>100,000 *(44 & over)* | Data for fiscal 1985 new registrants. |
| Unknown | Unknown | Unknown | Unknown | |
| 1,905,890 | 1,311,195 | 795,315 | 71,650<br>131,328 *(under 20)*<br>1,043,328 *(20–24)*<br>868,224 *(25–29)*<br>1,590,528 *(30 and over)* | See Matrix Notes. |
| 5,899,978 *(6–20)*<br>693,110 *(6–20)* | | | 4,525,000 *(Child-bearing age)*<br>5,417,542 *(All)* | Fiscal 1985 data. |

| ***PROGRAM*** | ***FISCAL 1986 FUNDING*** ***(Post-Sequester Appropriations) $ in Millions*** | ***INFANTS*** ***Under One Year*** | ***THE VERY YOUNG*** ***Ages One to Five*** |
|---|---|---|---|
| 11. Maternal and Child Health Block Grant | 457.45 | Unknown | Unknown |
| 12. Preventive Health Services Block Grant | 87.55 | Unknown | Unknown |
| 13. Women, Infants, and Children Supplemental Food Program | 1,580.49 | 800,000 | 1,610,000 |
| 14. Food Stamp Program | *13,457.80 |  | 3,300,000 *(4 & under)* |
| 15. Childhood Immunizations | 56.89 |  |  |
| 16. Social Services Block Grant—Title XX | 2,583.90 | About 500,000 children, *(0–5)* receive child care | 754,680 *(under 18)* |
| 17. Alcohol, Drug Abuse, and Mental Health Block Grant | 468.93 | Unknown | Unknown |
| 18. Anti-Drug Abuse Act | **516.17 | Unknown | Unknown |

SOURCE: Unless otherwise noted, funding figures come from the *Congressional Record*, July 31, 1986, pp. H5154–H5208. Unless otherwise specified, figures reflect appropriation for grants to states only.

*SOURCE: House Report 99-686, Agriculture, Rural Development, and Related Agencies Appropriations Bill, 1987, p. 135.

**SOURCE: Federal Funds Information for States, Issue Brief 87-5, April 10, 1987.

*This matrix attempts to illustrate a variety of federal programs that can be used to serve different populations as part of state and community prevention efforts. Where existing data bases providing demographic information on populations served under these programs do not mesh perfectly with age classifications used in the matrix, specific age information is provided in parentheses.*

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| ***THE BEGINNING YEARS***<br>***Ages Six to Ten*** | ***THE MIDDLE YEARS***<br>***Ages Eleven to Fourteen*** | ***ADOLESCENTS***<br>***Ages Fifteen to Seventeen*** | ***ADULTS***<br>***Ages Eighteen or Older*** | ***NOTES*** |
|---|---|---|---|---|
| Unknown | Unknown | Unknown | Unknown | |
| Unknown | Unknown | Unknown | Unknown | |
| 99,000 *(6–17)* | | | 633,000 | Fiscal 1985 data. |
| 7,200,000 *(5–17)* | | | 8,600,000 *(18–60)*<br>1,800,000 *(over 60)* | See Matrix Notes. |
| | | | | 3 million to 4 million children under age 18 are immunized each year. Fiscal 1983 data. |
| | | | 615,660 *(18–54)*<br>276,385 *(60 & over)* | Data for 1984 from 25 states. |
| Unknown | Unknown | Unknown | Unknown | |
| Unknown | Unknown | Unknown | Unknown | See Matrix Notes. |

# MATRIX NOTES

### *1. Education Consolidation and Improvement Act*

**Funding.** Funding figure reflects the fiscal 1986 appropriation for grants to local educational agencies, state agency programs, state administration and evaluation and technical assistance.

**Data.** Source for Chapter 1 data is the Chapter 1 Education Reporting System (CHIERS) report collected annually by the U.S. Department of Education. Data is reported by grade and has been converted to age. Total number of students (4,919,112) includes 543 ungraded students. Ungraded students are not reflected in the matrix.

### *2. Education of the Handicapped Act*

**Funding.** Figure reflects the fiscal 1986 appropriation for the state grant program and preschool incentive grants only.

**Data.** Source for data is a draft Annual Report to Congress on implementing the Education of the Handicapped Act. Data was collected by the U.S. Department of Education in December 1985.

### *3. Adult Education Act*

**Data.** Source for data is Annual Report to Congress on implementing the Adult Education Act, U.S. Department of Education.

### *4. Carl D. Perkins Vocational Education Act*

**Funding.** Figure reflects the fiscal 1986 appropriation for basic grants to states as well as other programs, including consumer and homemaker education and state advisory councils.

### *5. Head Start Act*

**Data.** Source is *Budget for the United States Government for the Fiscal Year 1986*, Committee on Education and Labor, U.S. House of Representatives, 99th Congress, 1st Session, March 1985, p. 53.

### *6. Job Training Partnership Act*

**Data.** Source is the Job Training Partnership Act Annual Status Report (JASR) and Job Training Longitudinal Survey, Employment and Training Administration, U.S. Department of Labor.

### *7. Work Incentive Program/WIN Demonstration Program*

**Data.** Numbers were derived by multiplying the percentage of registrants in each age category by the total number of new registrants. Source is *Background Material and Data on Programs Within the Jurisdiction of the Committee on Ways and Means, 1987 Edition*. Committee on Ways and Means, U.S. House of Representatives. WMCP: 100-4. 100th Congress, 1st Session. March 6, 1987, 392–93. New registrants for fiscal 1985 totaled approximately 1 million.

### *8. Community Service Block Grant*

### *9. Aid to Families with Dependent Children*

**Funding.** Figure reflects the fiscal 1986 appropriation for benefit payments less the child support enforcement offset, state and local administration and training, and emergency assistance.

**Data.** AFDC numbers were derived by multiplying the percentage of adults and children in each age category for fiscal 1983 by the total numbers of adults and children on an average monthly basis in fiscal 1985. Source for 1983 data is *Recipient Characteristics and Financial Circumstances of AFDC Recipients*, Family Support Administration, U.S. Department of Health and Human Services, 1983. Source for 1985 data is House Committee on Ways and Means Report, p. 429. Total numbers for children and adults, based on fiscal 1985 data, were 7,160,000 and 3,648,000, respectively. Data does not reflect counts for unknown 28,660 and 14,592 for children and adults, respectively.

### 10. Medicaid

**Funding.** Figure reflects the fiscal 1986 appropriation for benefits and administration.

**Data.** Source for all data on Medicaid is the 2082 data base, Health Care Financing Administration, U.S. Department of Health and Human Services.

### 11. Maternal and Child Health Block Grant

### 12.Preventive Health Services Block Grant

### 13. Women, Infants, and Children Supplemental Food Program

**Data.** Source is *Study of WIC Participant and Program Characteristics,* Office of Analysis and Evaluation, Food and Nutrition Service, U.S. Department of Agriculture, March 1986, pp. xiv-xvii.

### 14. Food Stamp Program

**Funding.** Figure reflects the fiscal 1986 appropriation for the Food Stamp Program and Nutrition Assistance for Puerto Rico.

**Data.** Food Stamp numbers were derived by multiplying the percentage of recipients in each age category for fiscal 1982 by the total number of recipients on an average monthly basis in fiscal 1986. Fiscal 1982 data were taken from a characteristics report published by the Food and Nutrition Service of the U.S. Department of Agriculture in August 1982. Source for fiscal 1986 data is House Committee on Ways and Means Report, p. 504. Total number of Food Stamp recipients is 20.9 million.

### 15. Childhood Immunizations

**Funding.** Figure reflects the fiscal 1986 appropriation for grants, direct operations, and the vaccine stockpile.

**Data.** Source is *Federal Programs Affecting Children,* Select Committee on Children, Youth, and Families, U.S. House of Representatives, 98th Congress, 1st Session, January 1984, p. 168.

### 16. Social Services Block Grant—Title XX

**Data.** Source is unpublished data by the American Public Welfare Association.

### 17. Alcohol, Drug Abuse, and Mental Health Block Grant

### 18. Anti-Drug Abuse Act

**Funding.** Figure reflects the fiscal 1987 appropriation for formula amounts only.

**Data.** For purposes of the High Risk Youth Demonstration Grant, the legislation defines "high risk youth" as any individual under 21 years of age who is at high risk of becoming, or has become, a drug abuser or an alcohol abuser, and who 1) is a child of a substance abuser and/or; 2) is a victim of physical, sexual, or psychological abuse and/or; 3) has dropped out of school and/or; 4) has become pregnant and/or; 5) is economically disadvantaged and/or; 6) has committed a violent or delinquent act and/or; 7) has experienced mental health problems and/or; 8) has attempted suicide; or 9) is disabled by injuries.

> ***"We should make programs more efficient by increasing state and local flexibility to meet specific needs and by decreasing intergovernmental paperwork. More importantly, we should make whatever changes are necessary to make programs more humane and sensitive to the people they are serving. This may or may not save money, but if so, it will be an added benefit."***
>
> JOHN H. SUNUNU
> Governor of New Hampshire

While the bulk of the Title II-A funds must be used for the economically disadvantaged, 10 percent of Title II-A participants may be exempt from the criteria for age and economic status if they face other severe barriers to employment, such as teenage parenthood or substance abuse. Forty percent of the money must be spent on youth between the ages of sixteen and twenty-one. This money, if appropriately targeted by local service delivery areas, can be very useful in addressing the employment needs of adolescent parents, children in welfare families, and other welfare recipients.

Recent amendments to the Job Training Partnership Act have emphasized using the summer program funds to enhance the basic educational skills of youth. Youth are encouraged to complete school or enroll in supplementary or alternative school programs. Resources under this program can also be used to assist adolescent parents and youth who receive AFDC benefits.

Known as the 8 percent set-aside, state education coordination activities and grants authorized under Section 123 of JTPA can be used to provide literacy training, dropout prevention, school-to-work transition services, and related services in cooperation with the education system. Resources available under this program can be used to enhance employability skills and to bring about desired reforms in literacy instruction for youth and adults.

The 6 percent set-aside was established to be "used by the Governor to provide incentive grants for programs exceeding performance standards, including incentives for serving hard-to-serve individuals." Typically this money is used to reward service delivery areas that meet performance standards or to provide technical assistance to areas that are having trouble administering other programs. Governors could set aside a portion of this amount to specifically reward service delivery areas that target at-risk youth, teenage parents, and welfare recipients.

***Community Services Block Grant.*** The state Community Services Block Grant (CSBG) provides a range of services and activities that can have a measurable impact on the causes of poverty. These funds can be used for almost any barriers initiative. For example, in fiscal 1986, 10 percent of program funds were spent on education-related activities, including adult basic education programs, General Educational Development (GED) certification, and programs that teach English as a second language. States can establish program and coordination priorities for local providers that can then be used as a part of any local initiative.

***Aid to Families with Dependent Children and Child Support Enforcement.*** The Aid to Families with Dependent Children (AFDC) and Child Support Enforcement programs are important resources for children. AFDC provides cash assistance and employment and job search assistance to poor families with children who meet specific income and resource requirements. Also, the income disregard is an important source of day care and transportation for employed recipients. In all states AFDC is provided to single-parent families; in about half the states, certain two-parent families are eligible.

States have the option to receive federal matching funds for community work experience, job search assistance, and grant diversion programs that can all be used to support work-related initiatives. Administrative funds can be used to help states establish the referral and information systems needed to manage the programs.

The child support enforcement program requires states to locate absent parents, establish paternity, and assist in the establishment and collection of child support payments, whether they were established under court or administrative order or are voluntary. But more needs to be done. The federal Office of Child Support Enforcement has indicated that nearly 90 percent of families receiving AFDC in fiscal 1986 did not receive child support payments.

AFDC applicants and recipients are required to assign their child support rights to the state in order to receive AFDC. Money collected for those who do not receive AFDC goes directly to the family. Child support collected on behalf of AFDC recipients is paid to the state to offset its AFDC expenditures. According to the Office of Child Support Enforcement, in fiscal 1986, the highest percentage of AFDC and foster care payments recovered through child support collections in a single state was close to 25 percent, while the lowest was only 3 percent.

Additional child support collections will further reduce state expenditures on AFDC and those savings could be invested in prevention programs or in a children's trust fund.

***Medicaid.*** The Medicaid program is a mainstay of federal financial support for health care for low-income individuals. In particular, Medicaid's Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) component for individuals under the age of twenty-one can be used as an innovative funding mechanism for a wide range of preventive medical services. For example, this program can be used to fund private clinics to screen, diagnose, and treat a variety of medical problems. It also can finance special coordinative efforts between health, education, and other agencies in a similar effort.

Recent changes in Medicaid law permit states to provide medical coverage for pregnant women and children up to age five who have incomes up to the federal poverty line, without extending welfare eligibility. This will permit states to further develop comprehensive medical services for dependent children and can be used to serve pregnant adolescents.

In some states, however, hospital reimbursement levels under Medicaid often discourage provider acceptance of pregnant teenagers as patients. Pregnancies among adolescents are high risk by definition and, therefore, often entail additional expense to deal with complications. Many providers are reluctant to accept pregnant adolescents who receive Medicaid because the potential expense exceeds the payment limit. States may want to review the potential adverse effects of cost containment, which may result in diminished access and quality of care.

***Maternal and Child Health.*** The Maternal and Child Health Block Grant seeks to reduce infant mortality, reduce the incidence of preventable disease and handicapping conditions among children, and increase prenatal, delivery and postpartum care for low-income mothers.

> *"The question of the relation of states to the federal government is the cardinal question of our constitutional system and every successive stage of our political and economic development gives it a new aspect, makes it a new question."*
>
> WOODROW WILSON
>
> 1908

> *"Our failure to resolve social problems is in large part a failure of the intergovernmental system."*
>
> THE COMMITTEE ON FEDERALISM AND NATIONAL PURPOSE
>
> December 1985

These funds can be used to provide health services and related activities, including planning, administration, education, and evaluation. Special consideration for at-risk teenagers is contained in the legislation and, therefore, the block grant is an important resource for teenage pregnancy prevention and parenting education programs. For example, funds can be used for inpatient hospital services to high-risk pregnant women and infants.

***WIC Program.*** The Supplemental Food Program for Women, Infants, and Children (WIC) can be used to support nutrition services and parenting education and child development programs. These education efforts are especially needed for teenage parents.

WIC has two distinct advantages over many other federal programs for use in teenage pregnancy initiatives. First, due to its specialized focus it is easy to target efforts to those most in need, such as teenage mothers. Second, since it is not subject to Gramm-Rudman-Hollings budget reduction targets, the level of funding for this program is likely to be more stable than some other human resource programs.

***Food Stamps.*** The Food Stamp program now requires all states to implement an employment and training program for able-bodied adults, beginning in April 1987. This program can be integrated into a broader prevention effort. The funds, though limited, can be used for almost all supportive services and for education, training, or employment-related activities comparable to the Work Incentive (WIN) and AFDC employment programs.

***Social Services Block Grant.*** The Social Services Block Grant, Title XX of the Social Security Act, is a highly flexible pool of money states can use to address many social problems. States are encouraged to furnish services "directed at the goals of achieving or maintaining economic self-support to prevent, reduce or eliminate dependency; and achieving or maintaining self-sufficiency, including reduction or prevention of dependency . . ." These broad goals make this program useful as a resource for many prevention initiatives, although competition for these funds may be particularly intense.

Numerous services that are financed by this program can be used specifically for welfare prevention. Primary among these is day care, which can be used for welfare recipients who participate in any of the state's work training programs.

Counseling services, family planning, health support services, and other appropriate combinations of services are just some of the investments that can offer long-term dividends and may ultimately reduce the need for expenditures by removing the barriers to self-sufficiency.

## Additional Resources

The programs included in the matrix are not the only federal programs that can be incorporated in coordinated state and community prevention efforts. While several are somewhat smaller in scope, nonetheless, they can provide valuable resources for assisting special at-risk populations. A partial listing of these follows:

***Bilingual Education and Immigrant and Refugee Assistance.*** A number of federal resources can be used to increase individuals' English language skills, including bilingual education programs, immigrant and refugee education programs, and legalization assistance programs authorized under the Immigration Reform and Control Act of 1986.

In particular, bilingual education programs can be used to assist students between the ages of five and seventeen who have limited English proficiency to receive instruction in their native language and in their subsequent transition to use of the English language.

States can work closely with local school districts that have bilingual education programs to ensure appropriate linkages between this program and those provided under the Family English Literacy Program. That program provides funds to teach English to adults, primarily parents of children in bilingual projects and out-of-school youth.

The immigrant education and refugee education programs provide assistance to school districts that enroll recently arrived immigrant and refugee children. English language instruction is an allowable activity under these programs and states may want to encourage local districts to use funds for this purpose.

The refugee resettlement assistance program offers English language training for recently arrived adult refugees. Local service providers should be encouraged to pool their resources from this program with those of vocational education or JTPA to provide a more comprehensive set of services.

States are now required to use a portion of their state allotments under the Immigration Reform and Control Act to provide educational services to eligible legalized aliens. Educational program costs are limited for each student, and include both elementary and secondary education and adult education assistance in English language and citizenship skills provided by local educational agencies and other public and private non-profit organizations, including community-based organizations.

States will need to monitor closely funding for education under the legislation, since there is no experience to indicate the number of undocumented aliens who will be legalized and eligible for services. In examining ways to use funds for educational services, states may want to encourage programs to offer English language classes in conjunction with other federally funded programs to help legalized aliens become self-sufficient.

***VISTA Literacy Corps.*** Established in 1986, the VISTA Literacy Corps is designed to recruit VISTA volunteers to be assigned to community literacy projects. Priority consideration is given to programs that serve individuals who have weak basic skills (fourth grade and below), are members of high-risk populations, and reside in unserved or underserved areas. Funds are provided to recruit volunteers and states may want to use VISTA volunteers to support state and community-based literacy projects.

***Higher Education Programs.*** Upward Bound and Talent Search are two of the Special Programs for the Disadvantaged authorized under the Higher Education Act. These programs, designed to help low-income and potential first-generation college students complete high school, can be incorporated into a dropout prevention strategy.

The College Work-Study Program provides part-time employment to students who need financial assistance, who meet other eligibility criteria, and who are selected by participating institutions. States should encourage institutions to train work-study students to be tutors, for example, to teach adult learners or to serve as volunteer tutors in the public school system or community.

# PROGRAM BARRIERS

> *"The current federal system remains overly complex, largely unaccountable, and wastefully uncoordinated. In view of the constraints on the revenues of all levels of government in the foreseeable future, it is vital that we find ways to improve the federal-state partnership. Change is needed, and change is possible."*
>
> JOHN H. SUNUNU
> Governor of New Hampshire

While these and other federal programs provide a number of resource opportunities states can use to develop an investment strategy, there are frequently some limitations on their use. These limitations assume a variety of forms, but all tend to restrict the kinds of services that can be provided and the types of clients that can be served.

Federal barriers fall into several major categories.

### *Perverse Incentives That Discourage Services to Those in Need.*

There is a well-recognized need to increase the effectiveness of child support enforcement. There are, however, possible disincentives to increasing child support collections for those custodial parents and children who are most in need. For example, the federal financial incentive system in Title IV-D Child Support Enforcement is structured to reward states with a high ratio of collections to administrative costs. This may discourage efforts to collect support for welfare recipients where the absent parent must be located out of state and paternity established. In such cases, the potential payoff is not yet known but the costs are relatively high. The federal incentive to assign a low priority to difficult cases may deny the welfare family needed funds, since the first $50 the state receives in child support is passed on directly to the family. Only the excess is kept to repay the state for its past welfare payments.

Both the AFDC and food stamp employment programs place a strong emphasis on immediate placement. While this may be desirable for many recipients, it may discourage the investment in more intensive programs that could increase wage levels and the prospect for longer term employment.

Similarly, the emphasis on job placement in the JTPA performance standards system, to the exclusion of measures of gains in employment competencies by youth, may discourage the use of these funds for dropout prevention strategies.

### *Complex or Duplicative Requirements That Divert Resources That Could be Used for Treatment.*

For example, differing regulatory requirements for implementing monthly reporting for both AFDC and Food Stamps increase the costs so that limited resources are reduced for other purposes. In the same manner, requirements for a single state agency may reduce opportunities for program coordination or administrative efficiency.

### *Uncoordinated or Conflicting Eligibility Requirements That Increase Administrative Costs, Discourage Referrals, or Prevent the Integration of a Variety of Services*

For example, the lack of a common definition of household under AFDC and food stamp regulations requires separate eligibility determinations and thus income definitions. In addition, both programs count the wages or unearned income from JTPA when determining benefits, which discourages participation.

### *Overly Restrictive or Complex Eligibility Requirements That Deny Services to At-Risk Populations or Discourage Potential Applicants.*

For example, the eligibility certification process for Medicaid may take several weeks and may result in delays for clients seeking needed but non-emergency medical assistance. Such delays may be a particular problem for the pregnant teenager who is still denying her pregnancy. The same young woman may be found ineligible anyway since states are required to take into consideration the financial resources of the teenager's parents. This may effectively deny services to the teenage who hasn't confided in her parent(s) or may result in the lack of early prenatal care until the pregnancy becomes obvious.

The eligibility criteria for WIC sometimes restrict its use. If a client is successful in attaining a reasonable nutritional and health status by virtue of participating in WIC, she may be dropped from the program even though it is only the WIC supplement which has allowed her to reach this standard.

Title IV-A child care and administrative funds are available only to cases where public assistance recipients are enrolled in work programs with direct vocational application. This precludes the states from assisting AFDC mothers from participating in two- and four-year degree programs that could result in subsequent employment with greater upward mobility.

### *Restrictive Limits on Services or Reimbursement That Reduce Program Flexibility or Provider Participation.*

For instance, the Women, Infants, and Children Supplemental Food Program (WIC) has made infants with iron deficiencies a priority population and provides iron-fortified formula for them. However, many infants cannot tolerate this formula, and WIC will not pay for other strategies that address the iron deficiency.

### *Conflicting Program Priorities That Make Coordination With State Programs Difficult.*

For example, using adult basic education monies alone would be insufficient to develop workplace literacy efforts because the federal guidelines do not emphasize the link between completing adult education classes or getting a GED with entering training and/or obtaining employment.

### *Uncoordinated Grants to Non-State Entities That Work to Undercut The Cooperative Efforts Needed for Successful Programs.*

For example, while states can have some influence on method and subjects of instruction, under Chapter 1 of the Education Consolidation and Improvement Act, schools are held accountable only if funds are not spent in the prescribed manner to meet fiscal requirements. States are not given a clear authority to monitor, evaluate, and enforce program outcomes.

Under Chapter 2 of this same act, states are prohibited from exercising any direct influence in the decision-making process of a school district concerning the expenditure of program funds except in providing technical and advisory assistance and monitoring compliance.

Bilingual education funds are awarded to local school districts through a competitive funding process, rather than through a formula based on the populations enrolled in schools. There are some substantial barriers that need to be resolved within this program, not the least of which is its slow response to changing demographics in states in which the number of people with limited proficiency in English is growing.

Head Start is another program in which federal funds are granted directly to local communities. States do not have easy access to information on the policies, procedures, and quality of services provided by Head Start agencies. Progress was made in 1986 when the law was changed to require Head Start agencies to coordinate their activities with other state and local programs serving the same children. However, no procedures or systems were specified to help implement this requirement. This, in turn, has made it difficult for states to identify gaps or duplication in service for Head Start children.

In order to ensure maximum utilization of all available resources, states should have the primary responsibility and authority to allocate funds and to ensure coordination so comprehensive strategies can be developed to assist at-risk children.

# THE NECESSARY FEDERAL RESPONSE

While the states are willing to assume the primary responsibility for developing a coordinated and cooperative approach to prevention, they cannot do so most effectively without the aid and assistance of the federal government. First, like the states, the federal government must be prepared to carry out those responsibilities that most appropriately rest at the national level. Second, the federal government must work with the states to address those statutory, regulatory, and administrative requirements in federal programs which pose barriers to the most effective use of limited resources. Third, the federal government must increase its own efforts to foster coordination across agency lines.

## Defining the Federal Role

The task forces identified two areas where primary responsibility must rest at the federal level: the interdiction of illegal drugs and reform of the welfare system.

***Stopping the Flow of Drugs.*** Although the states can help control the flow of illegal drugs, the federal government must increase its efforts to effectively close the borders to illegal drugs of all sorts. Federal actions in this area should include:

- Increasing the capacity of the United States Customs Agency to patrol the borders for all types of contraband, most of all drugs.

- Coordinating interdiction of drug shipments from foreign countries and assisting those countries in the eradication of drugs at the source. This should be a top federal priority, and it should be a part of foreign policy initiatives with these source countries.

- Expanding the role of U.S. military forces in air and sea interdiction efforts. This role should include all regions of the country and should represent a more significant effort than currently exists.

***Reforming the Welfare System.*** The federal government must also enact fundamental changes in the AFDC program to supply the tools states need to provide a new emphasis on employment and self-sufficiency. The federal government needs to be restructured to focus on the mutual responsibilities of the recipient and the government—to make clear that the recipient must assume a greater responsibility for seeking and preparing for work, and that government must assume responsibility for providing the education, training, and support programs necessary to make those efforts successful. Additional resources for education, training, and support programs are needed to make such efforts successful and to increase the capacity of the states to effectively manage services for welfare recipients. This redirection of the federal welfare program is crucial to establishing the mechanisms and environment in which a comprehensive Blueprint for Prevention can succeed.

## Removing Program Barriers

At the same time, the federal government must establish a firm commitment to an effective intergovernmental system and must work closely with the states to make that system a reality. Toward that end, the federal government must act immediately to improve information sharing and program coordination with the states. States need current and accurate data on the allocation of resources to sub-state grantees, and they need to be consulted in the development of federal funding priorities. The nation can no longer afford the lack of coordination or the failure of some federal programs recognize legitimate state concerns.

The federal government also needs to work with the states to continue to improve state flexibility in the implementation of federal programs. States need additional authority for the limited transfer of funds among related programs, for the development of common eligibility criteria, and for innovative delivery mechanisms. Toward those ends, the states support the continuation of existing block grants and the further consolidation of programs where possible.

Finally, the states urge the federal government to join in an intensive effort to identify and remove the regulatory barriers in existing programs that reduce state flexibility or that pose unnecessary programmatic or administrative burdens. Such an effort must include not only a review of existing requirements, but a procedure to identify and evaluate future regulations as well.

The states recognize that they must be active partners in these reform efforts, but it is vital that the federal government, too, be a full and supportive partner.

## Improving Interagency Coordination

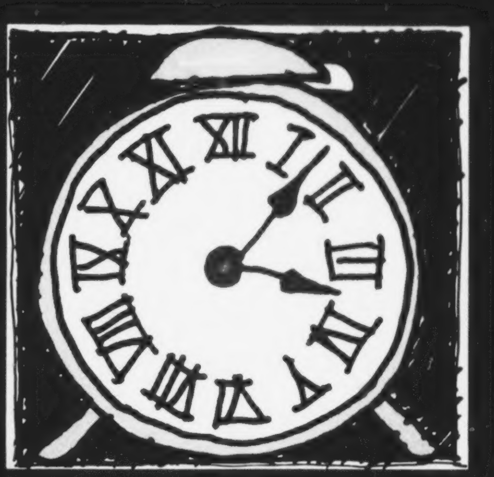
There are numerous opportunities for the states to use existing federal grants to complement a state prevention strategy. However, the complex and fragmented nature of these programs also requires new federal efforts to coordinate across agency and departmental lines and to encourage and facilitate cooperative efforts at the state and local level.

Over the last twenty-five years, the federal government has undertaken a number of interagency and interdepartmental initiatives to encourage cooperative action that focuses on prevention. One recent effort involves the U.S. Department of Labor (DOL), U.S. Department of Health and Human Services (HHS), private foundations, and several community organizations. This effort will provide funding for more than seventy-five community projects and four state projects as part of a major youth initiative. The projects are designed to improve local linkages between social services, education, training and jobs programs in order to help school dropouts, welfare recipients, teenage parents, and persons with developmental disabilities.

Another current effort is small in terms of dollars but significant nonetheless. The Department of Labor has awarded six grants in 1987 to local programs that serve adolescent parents, through an interagency agreement with the HHS Office of Adolescent Pregnancy Programs. The mutual effort is intended to increase local coordination between the health and job training systems to provide comprehensive services to adolescent parents. The goal is to help adolescent parents move away from welfare dependency and become self-sufficient.

The two departments also have embarked upon the "Youth 2000" initiative. This program hopes to foster "responsible family formation; lifestyles free from substance abuse; competence in daily living; education; employment and economic self-sufficiency; and improved mental and physical well-being for all the young in America." Youth 2000 is expected to improve access to needed services for youth and families; reduce out-of-wedlock teenage births; reduce accidental and violent deaths among older teenagers; improve literacy levels and high school completion rates; and reduce substance abuse rates among twelve- to seventeen-year-olds.

These efforts are to be applauded. More, however, needs to be done at the federal level and some additional key departments need to be included in these cooperative activities. States and communities actively interested in prevention will need to continue their efforts to encourage substantial interagency collaboration at the federal level that pools categorical monies whenever possible.



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## Task Force on Welfare Prevention

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## Task Force on Alcohol and Drug Abuse Prevention

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## Task Force on Teen Pregnancy

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The Governors' Staff Committee for the task force included Ruth Randall, Nan Skelton, and Pat DiPlacido, Minnesota; Judy Pittman, Alabama; Bob Cox, Florida; Nancy diLaura, Indiana; Mona Davis, Louisiana; Wendy Sherman, Maryland; Henry Sablan, Northern Mariana Islands; Fred Miller, Oregon; Karon Schaak, South Dakota; and Clarence E. Burdette and Katharine Becker, West Virginia.

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